



PAYROLL: EMPLOYEE CHANGE OF STATUS FORM

Use for new hires, status, address, position, pay rates

TOTAL HUMAN RESOURCES
864.879.0500
PAYROLL@TOTALHR.NET
fax 1864.879.8510

Company Name _____

Worksite Location/Dept _____

Employee Name _____

Last 4 of SSN _____

Position _____

Date _____

Action

Effective Date _____

New Hire

Rehire

Position Change _____

Transfer to _____

Status

Effective Date _____

Full Time

Part Time

Temporary

Occasional

FLSA Status

Exempt

Non Exempt

Leave of Absence

From _____ To _____

Paid

Unpaid

Medical

Military

Maternity

Personal

Educational

Other _____

Termination

Last Day Worked _____

For Cause

No Show

Accepted Another Job

Resigned

Laid Off

Deceased

Details of Termination _____

Pay Rate Change

Effective Date _____

Salary

Hourly

From \$ _____ Per _____ To \$ _____ Per _____

Employee Details Change

Address Change

Name Change (IDs Required)

Other

Authorized By _____