

# Payroll Change Notice

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ ID # \_\_\_\_\_

Social Security # \_\_\_\_\_

Employee Name \_\_\_\_\_

Department \_\_\_\_\_ Title \_\_\_\_\_

## Check Appropriate Box:

- Add to Payroll
- Change Rate Old Rate: \_\_\_\_\_ per \_\_\_\_\_  
New Rate: \_\_\_\_\_ per \_\_\_\_\_
- Remove from Payroll
- Change Title/Classification to: \_\_\_\_\_
- Transfer to: (Department) \_\_\_\_\_

Change Shift to: \_\_\_\_\_

Change Withholding Rate (Complete new W-4 form)

Change Status to:

Full-Time  Part-Time  Temporary

Leave of Absence: Paid?  Yes  No

Return (Date of return to work) \_\_\_\_\_

Address/Information Change \_\_\_\_\_

Date Effective: \_\_\_\_/\_\_\_\_/\_\_\_\_

## New Hire Information

Address \_\_\_\_\_

Telephone # \_\_\_\_\_ Date of Birth (For administrative use only) \_\_\_\_/\_\_\_\_/\_\_\_\_

Status:  Full-Time  Part-Time  Full-Time Temporary  Part-Time Temporary  
 Exempt  Non-Exempt  Hourly  Other \_\_\_\_\_

W-4 attached?  Yes  No

Rate of Pay \_\_\_\_\_ Per \_\_\_\_\_

## Reason for Payroll Change:

- Merit Increase  See Performance Appraisal  New Employee
- Promotion  Other \_\_\_\_\_

## Reason for Termination:

- Voluntary  Discharged  Laid Off  Other

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Submitted By: \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Approved By: \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_