## **Employee Status Report**

Store: Altoona23		Date: <b>11/1/2022</b>	Date: <b>11/1/2022</b>	
Employee Name:l	David Williams			
Date of Birth:		Manager:		
Social Security:		Supervisor:		
Employee phone:		Sex:   □ Female  □ Male	Sex:   □ Female   □ Male	
		Position: □ GM □ Asst Ma	anager 🗆 Shift Manager 🗆 Crew	
Status Type	Effective date	Pay Rate:		
New Hire				
Re-Hire				
		<u>From</u>	<u>To</u>	
Rate Change	11/07/22	12	13	
Store Transfer				
Vacation				
Sick				
Address Change				
Direct Deposit		*Attach voided check or bank documentation*		
Other				
	I		<u> </u>	
Comments:				
Employee Signature:		Date		