



Employee Change in Status or Compensation Form

Employee Profile

Employee Name

Date filed

Effective date of this change

Employee Information Changes

Current Information

New Information

Verification of Changes

Prepared by:

Approved by:

Reviewed by:

Immediate Supervisor

Second Level Manager

HR Personnel

Acknowledgment of the Employee

Name and Signature of Employee

Acknowledgment of the New Immediate Supervisor

Name and Signature of Employee