



## STATUS CHANGE FORM

Effective Date

Hire Date

Employee Number

Legal Name

LAST

FIRST

MIDDLE

### CHANGES MADE MUST BE EFFECTIVE FIRST DAY OF PAY PERIOD

	From	To
Home Department		
Location		
Direct Report to Manager (직속 상사)		
Job Title		
Full-Time or Part-Time Status		
Hourly Rate (Non-Exempt/Hourly Employee)		
Annual Salary (Exempt/Salary Employee)		
Other		

### Reason for Change (check all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Merit Increase  | <input type="checkbox"/> Location Change            |
| <input type="checkbox"/> Promotion   | <input type="checkbox"/> Branch/Department Transfer |
| <input type="checkbox"/> Position Change (use for jobs that are lateral or decrease) | <input type="checkbox"/> Other (provide reason)     |

Comments:

### Human Resources Only (if applicable)

- |   |   |  |                                      |  |
|---|---|--|--------------------------------------|--|
| <input type="checkbox"/> HR   | <input type="checkbox"/> T & A Supervisor | <input type="checkbox"/> Standard Hours (80) | <input type="checkbox"/> Pay Class   | <input type="checkbox"/> Time Off Policy |
| <input type="checkbox"/> Security Access (Manager & T&A Supervisor) |   |  | <input type="checkbox"/> Other _____ |  |

Enter By	Date
Audit By	Date