**<Business Name or logo>**

Employee Action Form

# Employee Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Employee Name: | |  | Employee SS #: |  |
| Employee Address: |  | Effective Date: |  |

# Employment Changes

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ☐ | New Hire/Rehire | Position: |  | | | Pay Rate: |  |
| ☐ | Position Change | New Title: |  | | | Reason: |  |
| ☐ | Supervisor Change: | Current Supervisor: |  | | | Previous Supervisor: |  |
| ☐ | Pay Change | Current Rate: |  | New Rate: |  | Reason: |  |
| ☐ | Termination | Last Day Worked: |  | Term Date: |  | Reason: |  |

# Classification Changes

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Change Type** | | **Current** | | **Change To** | |
| ☐ | Transfer | Title: |  | Title: |  |
| ☐ | Shift | Shift/Hours: |  | Shift/Hours: |  |
| ☐ | Status\* | Status: |  | Status: |  |
| ☐ | Classification\*\* | Classification: |  | Classification: |  |

\*Status= Part-time, Full-time, On-call, Temporary

\*\*Classification= Exempt, Non-Exempt

# Notes

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| --- |
|  |
|  |

# Authorization

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Employee Signature |  | Date |
|  |  |  |
| Approval Signature |  | Date |