



PERSONNEL MAINTENANCE FORM

Location _____	Effective Date _____
Employee Name _____	

Change of Status (check all that apply and add notes below as necessary)

<input type="checkbox"/> New Hire	<input type="checkbox"/> Part Time
<input type="checkbox"/> Rehire	<input type="checkbox"/> Full Time
<input type="checkbox"/> Leave of Absence - expected date of return _____	<input type="checkbox"/> Hourly Employee
<input type="checkbox"/> Voluntary Resignation - eligible for rehire? Y / N	<input type="checkbox"/> Salary Employee
<input type="checkbox"/> Involuntary Termination - eligible for rehire? Y / N	<input type="checkbox"/> Seasonal

Change of Payroll Info

Pay Rate Increase (please list all jobs the employee is getting an increase for):

Job _____	Current \$ _____	Proposed \$ _____	% Increase _____
Job _____	Current \$ _____	Proposed \$ _____	% Increase _____
Job _____	Current \$ _____	Proposed \$ _____	% Increase _____
Job _____	Current \$ _____	Proposed \$ _____	% Increase _____

Reason for Increase (check all that apply):

<input type="checkbox"/> 90 Day Review	<input type="checkbox"/> Annual Review
<input type="checkbox"/> Market Adjustment	<input type="checkbox"/> Merit
<input type="checkbox"/> Promotion	<input type="checkbox"/> Position Addition/Change

Add New Job(s)/Pay Rate(s):

Job _____	Pay Rate \$ _____	Reason _____
Job _____	Pay Rate \$ _____	Reason _____
Job _____	Pay Rate \$ _____	Reason _____

Change of Name/Address/Phone #

Street Address _____ Apt # _____

City _____ State _____ ZIP _____

School District _____ 4-Digit School District Code _____

New Phone Number (_____) _____ New Phone Number (_____) _____

New Last Name _____ New First Name _____

Note: Name Changes must be accompanied by a copy of a new social security card & completed W-4 Form

Notes: _____

Manager _____ Date _____

HR Manager _____ Date _____