



EMPLOYEE STATUS FORM

COMPLETE THIS SECTION FOR ALL TRANSACTIONS

EFFECTIVE DATE OF ACTION 6/12/23	CHECK ACTION REQUIRED <input type="checkbox"/> NEW HIRE <input type="checkbox"/> REHIRE <input type="checkbox"/> TRANSFER <input type="checkbox"/> SALARY CHANGE <input checked="" type="checkbox"/> SEPERATION <input type="checkbox"/> OTHER _____	
EMPLOYEE NAME (LAST, FIRST) Razmandan, Danial	EMPLOYEE #	DATE OF HIRE

COMPLETE ALL SECTION BELOW THAT APPLY

NEW HIRE OR REHIRE (per policy)	POSITION / TITLE	LOCATION / DEPT
	RATE \$ _____ <input type="checkbox"/> SALARY <input type="checkbox"/> HOURLY <input type="checkbox"/> COMMISSION <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> OTHER _____ <input type="checkbox"/> EXEMPT <input type="checkbox"/> NON-EXEMPT	SUPERVISOR

FROM

TO

TRANSFER, SALARY, OR OTHER	LOCATION/DEPT	LOCATION/DEPT
	POSITION/TITLE	POSITION/TITLE
	RATE \$ _____ <input type="checkbox"/> SALARY <input type="checkbox"/> HOURLY <input type="checkbox"/> COMMISSION <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> OTHER _____ <input type="checkbox"/> EXEMPT <input type="checkbox"/> NON-EXEMPT	RATE \$ _____ <input type="checkbox"/> SALARY <input type="checkbox"/> HOURLY <input type="checkbox"/> COMMISSION <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> OTHER _____ <input type="checkbox"/> EXEMPT <input type="checkbox"/> NON-EXEMPT
	REASON FOR CHANGE	

SEPARATION	POSITION/TITLE order selector	LOCATION/DEPT Modesto
	VOLUNTARY <input checked="" type="checkbox"/> NO REASON GIVEN <input type="checkbox"/> RELOCATED <input type="checkbox"/> PERSONAL REASONS <input type="checkbox"/> RETIRED <input type="checkbox"/> SEEK/ACCEPT OTHER EMPLOYMENT <input type="checkbox"/> JOB DISSATISFACTION <input type="checkbox"/> JOB ABANDONMENT <input type="checkbox"/> COMPETITOR <input type="checkbox"/> OTHER _____	
	INVOLUNTARY <input type="checkbox"/> VIOLATION OF COMPANY RULE OR POLICY <input type="checkbox"/> EXCESSIVE ABSENTEEISM/TARDINESS <input type="checkbox"/> UNSATISFACTORY JOB PERFORMANCE <input type="checkbox"/> DECEASED <input type="checkbox"/> LAYOFF (Reorganization) <input type="checkbox"/> OTHER _____	

INSTRUCTION FOR FINAL PAY CHECK: send to modesto branch

COMMENTS: _____

SUPERVISORS NAME: Rudy Gutierrez SUPERVISORS SIGNATURE: Rudy Gutierrez DATE: 6/12/23

HUMAN RESOURCES NAME: _____ HUMAN RESOURCES SIGNATURE: _____ DATE: _____

EMPLOYEES SIGNATURE: _____ DATE: _____

COO/MANAGERS APPROVAL: _____ DATE: _____

All approvals must be attained before presenting to employee