



Employee Status Change Form

SECTION 1 Hiring Manager completes - STATUS CHANGE DETAILS:

Employee Name and ctclick ID#:		Combo Code: <i>(If unknown, please contact Business Services)</i>		
Title:	Start Date:	End Date:	Hours/Week:	
Supervisor Name:	% of Full-Time:	Premium pay? <i>(per CBA)</i> <input type="checkbox"/> Shift <input type="checkbox"/> Bilingual	Work Phone:	
Department:	Is this a Supervisory role? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Detailed information regarding change:				

SECTION 2 HR Completes - POSITION DETAIL UPDATES (as applicable):

Position number:	Job Code:	Salary Range & Step:		Salary:
Employee Type: <input type="checkbox"/> Classified <input type="checkbox"/> Exempt <input type="checkbox"/> Faculty <input type="checkbox"/> Adjunct	Job Type: <input type="checkbox"/> Permanent <input type="checkbox"/> Non-Perm (up to 18 months) <input type="checkbox"/> Hourly (up to 17hrs week) <input type="checkbox"/> Probationary <input type="checkbox"/> Temporary <input type="checkbox"/> Trial Service <input type="checkbox"/> Cyclic <input type="checkbox"/> Annual Contract <input type="checkbox"/> Project <input type="checkbox"/> Interim	Benefit Eligibility: <input type="checkbox"/> Medical <input type="checkbox"/> Retirement <input type="checkbox"/> VEBA	Leave Accrual: <input type="checkbox"/> Vacation <input type="checkbox"/> Sick <input type="checkbox"/> Personal Holiday <input type="checkbox"/> Personal Leave	Tenure Indicator: <input type="checkbox"/> Probationary <input type="checkbox"/> Tenured <input type="checkbox"/> Special <input type="checkbox"/> N/A

SECTION 3 APPROVALS:

Dept Hiring Manager: _____

Date: _____

VP of area: _____

Date: _____

VP of HR: _____

Date: _____

President: _____

Date: _____

**If applicable, an appointment letter or contract will be created after approvals.*