



MARION EYE CENTER & Optical

PAYROLL STATUS CHANGE

EMPLOYEE NAME _____

Today's Date _____ EMPLOYEE'S SUPERVISOR _____

EFFECTIVE CHANGE DATE (OR LAST DATE WORKED) _____

CHANGE	FROM	TO
POSITION		
DEPARTMENT/STORE		
PAY RATE		

REASON FOR CHANGE:

- NEW HIRE
 RE-HIRE
 PROBATION PERIOD COMPLETE
 TRANSFER
 PROMOTION
 RESIGNATION
 RETIREMENT
 LAYOFF
 DISCHARGE
 DEMOTION
 RE-EVALUATION
 MERIT INCREASE
 NO SHOW
 OTHER _____

Comments: _____

SUPERVISOR SIGNATURE _____ DATE _____