HUMAN RESOURCES
PERSONNEL CHANGE DOCUMENT

SECTION A: CURRENT EMPLOYEE INFORMATION (Please complete all fields.)

Employee ID	Last Name	First Name	MI	Effective Date

Employee Status	Department Name	Division	Locator

Step	Exec. Ben.	BU	Jobcode	Job Title

SECTION B: TRANSACTION TYPE (Please check only **ONE** primary transaction. Select related sub-categories, if applicable)

Primary Transaction:

- ☐ Change to lower classification
- ☐ Demotion
- ☐ Hire SSN:
- ☐ Incentive Pay
- ☐ Lateral Transfer
- ☐ Layoff
- ☐ Merit Increase
- ☐ Pay Exceptions (Add/Delete)
- ☐ Promotion
- ☐ Reclassification (Exempt only)
- ☐ Rehire
- ☐ Reinstatement
- ☐ Separation Rehire? ☐
- ☐ Status Change
- ☐ Wage Adjustment

Sub-Category:

☐ CES Waiver ☐ Leave of absence ☐ Pipeline ☐ Recall ☐ Red Circle ☐ Retiree ☐ Special Recognition Increase (SRI)

SECTION C: REQUESTED UPDATES (Please complete all applicable fields.)

Employee Status	Department Name	Division	Locator	Entity	Sub-Entity
	-				

Step	Exec. Ben.	BU	Jobcode	Job Title	Index Code	Uniform Allowance

Bi-Weekly Hrs.	Base Bi-Weekly Rate	Adjusted Bi-Weekly Rate	TWU Base Hourly Rate	TWU Adjusted Hourly Rate

Delete Pay Exceptions	Add Pay Exceptions	Maintain Pay Exceptions

Job Opening No.	Is this a temporary position and expected to last more than 6 mths ? ☐ If yes, enter appropriate retirement code	Position Number

SECTION D: INCENTIVE PAY (Indicate the amount, gross or net and the proper code.)

Incentive Pay Code: **Amount:**

☐ Gross (Applicable taxes are deducted from this amount) ☐ Net (The amount is grossed up. Applicable taxes are then deducted.)

SECTION E: REMARKS

SECTION F: AUTHORIZATIONS (Proper authorizations must be obtained. Otherwise, the form will be returned to the originator.)

Print Name	Signature	Date

SECTION G: FOR USE BY HUMAN RESOURCES ONLY

DOB	Bud.St.	Gender	Ethnic.	Educ.	Med. Date	Marital	Tax Ex.	W/H	FICA	Retirement CD./%	DOH

	Step	Occ. Cd.	BU	Annv. Dt.	Stat. Dt.	Emp. Stat	Base BW	Adj. BW	L1	L2
Historical										
Updated										
Retroactive Adjustment	Code						T/O Change Enter Dept/Div	From	Dept	Div
	Amt.							To	Dept	Div

PPE Date Retro. Adj. Paid:	Processed by (Stamp and Date)	Audited By (Stamp and date)

Last updated by: JXC JOY CLODFELTER 6/22/2021 11:08:28 AM