



Employee Status Change Form

Today's Date: _____ Change effective date: _____

Church/Location: _____ Title/Position: _____

Employee Name: _____ Personal Email: _____ Lay Clergy

Compensation & Changes

Current Employee New Hire Rehire Merit Increase Promotion

Transfer From: _____ To: _____ Other: _____

Full Time (1500 or more hours per year) Part Time (1000-1499 hours per year) Part Time (less than 1000 hours per year)

Exempt/Salary

Non-Exempt/Hourly

\$ _____

OR

\$ _____

^Annual Salary Amount

(Minimum \$43,888 annually or meet prerequisites)

^Hourly Amount

Other: Change Position Add/Remove Position Housing Allowance _____

Notes: _____

Termination

Termination of Employment Retirement Other (explanation below):

Last day of work: _____ Paid though date: _____ Eligible for rehire: Yes NO

Misc. Change Request: _____

Church Administrator/Manager Signature: _____

Date: _____

Internal Staff: _____