

Employee Information Change Form

Employee Name:

Personal Information

New Name:

New Home Phone:

New Cell Phone:

New email:

Pay Rate

Old Rate:

New Rate:

Effective Date (not pay date) of Change:

Employee Status

Termination Date:

Last Day Worked:

Reason for Termination:

New Status (full-time or part-time):

Submitted/Approved By:

Date:

*Note: For Other Changes
Address or Withholding Allowance - Submit New W-4 Form
Bank Changes - Submit new Direct Deposit Authorization Form*