

Employee Status Change Form

Employee Name			
(First Name, Last Name) Effective Date of Change			
Effective Date of change			
REASON FOR CHANGE			
П aı			
Ш	Name Change	EXAMPLE: From Salina Shing to Salina Yu	
	Address Change		
	Direct Deposit Banking Change	Attach or insert image of voided check.	
	Status Active Inactive Terminated Explanation:		
		Maternity Leave Leave of Absence Short Term Disability	
	Leave	Long Term Disability Lay off Other (provide details below)	
		Expected Return Date: DD/MM/YYYY	
	Return to Work	DD/MM/YY Reason for Return to Work:	
		☐ Employee ☐ Contractor ☐ Consultant	
		Regular, full-time Regular, part-time	
	Position Status	Temporary, full-time Temporary, part-time	
		Term On-going Status	
		Term End Date (if applicable): DD-MM-YY	
	Title	EXAMPLE: From Marketing Coordinator to Marketing Specialist	
	Reports to (Name & Title)	EXAMPLE: From Joe Smith. Line Superviser to James Wong, Warehouse Manager	
	Department Transfer	EXAMPLE: From Marketing to Sales	
	Hours of Work/Week	EXAMPLE: From 37.5 to 40	
	Exempt from Overtime	Yes No	

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- Identify your HR priorities
- 22 HR topics
- Create HR intranet

Support your HR Function

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- Legislation Portal
- Remote Workforce Portal
- Mental Health Portal
- Diversity & Inclusion Portal
- Weekly updates, email notifications
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- Special licensing for use with clients
- Additional module + additional download of pre-assembled folders and templates to create your own master HR toolkit to re-use for new clients
- Pricing.

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APPROVALS

Authorized by Manager (Print Name):	Title:
Signature	Date
Authorized by Next Level Manager (Print Name):	Title:
Signature	Date
Authorized by HR (Print Name):	Title:
Signature	Date

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