

## PAYROLL CHANGE NOTICE FORM

upload at <https://secure.landrumhr.com>>My Document Library>Create New>Subject: Employee Documentation  
(and follow the remaining prompts)

Employee Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Client Name/Location: \_\_\_\_\_

**Hourly Rate/Salary Change:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

☐ Hourly ☐ Salary Exempt (no overtime) ☐ Salary Non-Exempt (may receive overtime) ☐ Commission ☐ Piecework ☐ Seasonal ☐ Temporary

**Job Title Change:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

**Dept. Change:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

**Part Time/Full Time Change:** ☐ Part time to Full time ☐ Full time to Part time  
☐ On Call/PRN (Active) ☐ On Call/PRN (Inactive)

Average hours to be worked per week: \_\_\_\_\_ **Effective Date:\*** \_\_\_\_\_

### Reason(s) for Change

- |  |   |                                     |
|--|---|-------------------------------------|
| <input type="checkbox"/> Merit Increase  | <input type="checkbox"/> Cost of Living Adjustment  | <input type="checkbox"/> Layoff     |
| <input type="checkbox"/> Probation Completed   | <input type="checkbox"/> Length of Service Increase | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Promotion   | <input type="checkbox"/> Re-evaluation of Job       | <input type="checkbox"/> Transfer   |
| <input type="checkbox"/> Increased Responsibilities  | <input type="checkbox"/> Demotion                   | <input type="checkbox"/> Other      |
| <input type="checkbox"/> Leave of Absence (Check One: <input type="checkbox"/> Medical <input type="checkbox"/> Maternity <input type="checkbox"/> Military <input type="checkbox"/> Educational, Other) |   |                                     |

**Pay Cycle:** Change from: \_\_\_\_\_ To: \_\_\_\_\_

Comments: \_\_\_\_\_

### Please complete this section if applicable

#### Supervisor Change:

(responsible for managing this employee's hours)

From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

**Job Title & Code Change:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

**Pay Rate for this job:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

**Job/Project Percentage:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

**Job Title & Code Change:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

**Pay Rate for this job:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

**Job/Project Percentage:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

**Job Title & Code Change:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

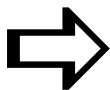
**Pay Rate for this job:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

**Job/Project Percentage:** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

**Change in Actual/Fixed?** From: \_\_\_\_\_ To: \_\_\_\_\_ Eff. Date:\* \_\_\_\_\_

Is there a change in employee's duties/job? If so, explain. \_\_\_\_\_

**\*IMPORTANT!** This is the date that the requested change(s) will be made in XactTime. We recommend that the effective dates be made after a pay period has ended and after payroll reports are run but before the new pay period begins. Please keep in mind that the date the change is made, all associated rules for that department, job payroll policy, etc. will apply.



Signature of Person Completing form: \_\_\_\_\_

Date: \_\_\_\_\_

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