

EMPLOYEE ACTION FORM

Formerly called Add/Change Form

Must check one: CONFERENCE LOCALLY FUNDED



Employee's Full LEGAL Name: _____
Last Name First Name Middle Name

Work Location Name: (Church/School/Office) _____

Contact Person: (Supervisor/Pastor/Principal/Director) _____

Supervisor Email: _____ Supervisor Phone: _____
Area Code & Number

Select the action that applies and fill out section completely

<p>1. <input type="checkbox"/> HIRE</p>	<p>TYPE OF HIRE, select one: <input type="checkbox"/> NEW <input type="checkbox"/> REHIRE (within 12 months of last day worked: ___/___/___)</p> <p>WORK STATUS, select one: <input type="checkbox"/> Full-Time Regular <input type="checkbox"/> Part-Time Regular <input type="checkbox"/> Substitute Teacher <input type="checkbox"/> Student <input type="checkbox"/> Interim <input type="checkbox"/> Temporary (Less than 6 months and must indicate date for the end of the term of employment)</p> <p>JOB TITLE: _____ Date voted by Board/Committee _____</p> <p>START DATE: _____ End Date (if temporary only) _____</p> <p>NUMBER OF HOURS PER WEEK: _____</p> <p>PAY RATE: <input type="checkbox"/> Hourly @ \$ _____ per hour <input type="checkbox"/> Salary @ _____ % Remuneration (with prior approval of SCC HR & meet minimum amount & EAP status) <input type="checkbox"/> Other _____</p> <p>Employee Email Address Mandatory for AB506 Training</p>	
<p>2. <input type="checkbox"/> CHANGE</p>	<p>FILL IN ALL CURRENT INFORMATION <i>Do NOT leave blank!</i></p> <p>Current Pay \$ _____</p> <p>Current Position: _____</p> <p>Current Hours worked per week: _____</p> <p>Other: _____</p> <p>Check one of the options below: <input type="checkbox"/> MOVE from previous position to NEW position <input type="checkbox"/> KEEP previous position and ADD these changes</p>	<p>FILL IN REQUESTED CHANGES If no change, write "no change." Do not leave blank.</p> <p>Change to: \$ _____</p> <p>Change to: _____</p> <p>Change to: _____</p> <p>Other: _____</p> <p>EFFECTIVE DATE: _____</p>
<p>3. <input type="checkbox"/> SEPARATION/ TRANSFER WITHIN SCC</p>	<p>TYPE OF SEPARATION, select one: <input type="checkbox"/> Resignation (attach resignation letter) <input type="checkbox"/> End of Temporary Position <input type="checkbox"/> Retirement (attach resignation letter) <input type="checkbox"/> End of Contract <input type="checkbox"/> Reduction in force (attach prior HR Authorization; do NOT terminate without HR approval) <input type="checkbox"/> Dismissal (attach termination letter from board/supervisor – MUST have prior HR authorization)</p> <p>Position held: _____ Last day worked: _____</p> <p>Forwarding address for final paycheck: _____</p> <p>_____</p>	

APPROVAL: Print Name of signer: _____

Date: _____ Authorized Signature: _____ Title: _____

FOR SCC OFFICE USE:

Date: _____ Conference Treasurer Signature: _____ HR initials: _____

Employment Level: _____	Workterra: Date Entered _____	Initials: _____
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