

# HUMAN RESOURCES

## EMPLOYEE DATA CHANGE FORM

FORMAT NO.:                      REV. NO.                      REV. DATE

DOCUMENT NO.:                      DATE:

EMPLOYEE CODE	EMPLOYEE NAME	DEPARTMENT
<input type="text"/>	<input type="text"/>	<input type="text"/>

TYPE OF DATA CHANGE	REASON OF DATA CHANGE
<input type="text"/>	<input type="text"/>

JOB HOURS CHANGE	WAGES CHANGE	TYPE OF PAYMENT MODE CHANGE	OTHER CALC. CHANGE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

DETAILED INFORMATION OF CHANGES MADE

<input type="text"/>
<input type="text"/>

WEEK OF CHANGE

<input type="text"/>
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VACATION CHANGE

<input type="text"/>
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SUPERVISOR NOTES

<input type="text"/>
Sign.

**OTHER DETAILS**

END OF PROBESSION PERIOD - *DETAILS*

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RESIGNATION / TERMINATION - *DETAILS*

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RETIREMENT- *DETAILS*

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LOCATION CHANGE - *DETAILS*

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EMPLOYEE NOTE

<input type="text"/>
Sign.

HUMAN RESOURCES NOTE

<input type="text"/>
Sign.

APPROVAL NOTE

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^ AUTHORIZED SIGN.