



KAUFMAN COUNTY

PAYROLL CHANGE FORM

Employee Name (last, first)	Employee #	Effective Date
Employee Status		
<input type="checkbox"/> Regular Full-Time (40 hours a week) <input type="checkbox"/> Modified Full-Time (30 hours or more a week) <input type="checkbox"/> Regular Part-Time (less than 30 hours a week) <input type="checkbox"/> Part-Time Variable Hour (variable schedule less than 30 hours a week) <input type="checkbox"/> Temporary (temporary assignment)		
Normal Hours Worked per Week	Employment Rate Type	FLSA Status
<input type="checkbox"/> 40 <input type="checkbox"/> 30 or more <input type="checkbox"/> 29 or less <input type="checkbox"/> Other _____	<input type="checkbox"/> Hourly <input type="checkbox"/> Salaried	<input type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt
Action Type		Eligible for Rehire in this Department
<input type="checkbox"/> New Hire <input type="checkbox"/> Re Hire <input type="checkbox"/> Promotion <input type="checkbox"/> Transfer <input type="checkbox"/> Demotion <input type="checkbox"/> Pay Adjustment <input type="checkbox"/> Longevity Increase <input type="checkbox"/> Re-evaluation of existing job <input type="checkbox"/> Resignation <input type="checkbox"/> Termination <input type="checkbox"/> Retirement <input type="checkbox"/> Other _____		<input type="checkbox"/> Yes <input type="checkbox"/> No
Comments/Reason for Termination		

<i>PRESENT STATUS</i>				<i>NEW STATUS</i>			
Title				Title			
Department				Department			
Department Code(s)				Department Code(s)			
Base		Hourly Rate		Base		Hourly Rate	
Step		Pay Rate 1		Step		Pay Rate 1	
Base Total		BW Step		Base Total		BW Step	
Longevity		BW Longevity		Longevity		BW Longevity	
Proficiency		BW Proficiency		Proficiency		BW Proficiency	
Merit		BW Merit		Merit		BW Merit	
Travel		Travel		Travel		Travel	
Cell Phone		Cell Phone		Cell Phone		Cell Phone	
Uniform		Uniform		Uniform		Uniform	
Other		Other		Other		Other	
Gross		BW Gross		Gross		BW Gross	

FOR PAYROLL ONLY
LEAVE CALCULATION

APPROVALS	
Supervisor	Date
Budget Approval (if needed)	Date
Human Resources Director	Date