

West Branch-Rose City Area Schools

Employee: New / Change / Exit Form

Employee Name <i>(legal name per District Records - no nicknames)</i>		
First	Middle	Last

Employee Number

New or Corrected Name (* See Note below)		
First	Middle	Last

Effective Date

Current Information	Description	Changed To
	Title	
	Building	
	Department	
	Grade Level	
	Supervisor	
	Hours Per Week	
	Status (Full or Part-Time)	
	Salary/Wage	
	Vacation Carryover	
	Sick Time Carryover	
	Personal Time Carryover	
	Date of Hire:	
	Date of Termination:	
	Physical Address Change	
	City & Zip Code	
	PO Box? Must supply:	
	Phone Number Change	

Emergency Contact Information		
Name:	Address:	
Relationship:		
Home Phone#:	Cell Phone#:	Work Phone#:

Reason for Change		
Promotion	Layoff	Update
Relocation	Resignation	Retirement
Termination	Replacement for (employee name, not position):	

Exiting Information (Replaces Exit Interview)	
1. Letter of resignation/retirement turned into Central Office? Yes No N/A	Will IRS (W-2) to be sent to a different address than we have on record? Yes No <i>(Please list address above)</i>
2. Equipment inventory list turned in? Yes No N/A	
3. All keys issued by the school turned in? Yes No N/A	

Approvals			
*Name Change Note: NO changes can be made until Payroll receives a new Social Security card. SS Card Received; date: _____ Initials _____			
Having submitted an updated Social Security card to the Payroll Coordinator, I understand that my email address will now change. A new email account will be established, and the existing email account will also remain available for 30 days. During the 30 days, I understand I may access the existing account to archive information I need. After 30 days the existing account will close and only my newly established email account will remain.			
Employee	Administrator	Superintendent	
Date Signed:	Date Signed:	Date Signed:	

Central Office Use Only			
Account#	Account#	Account#	
Date: _____	by _____	Date: _____	by _____