Southern California Conference: Human Resources Department

## **FMPLOYEE ACTION FORM**

Must check one:	CONFERENCE	LOCALLY FUNDED
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EMPL 01 - EMPLOYEE ACTION FORM/Add Change

Undated 09/2022

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Formerly called Ad	dd/Change Form			E	m	pΙ	Оу	e	e's	S

Full LEGAL Name: Work Location Name: (Church/School/Office)

First Name Middle Name

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

Employment Level: Workterra: Date Entered Initials:

Supervisor Email: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_\_ Select the action that applies and fill out section completely TYPE OF HIRE, select one: 1. ☐ HIRE □ **NEW** □ **REHIRE** (within 12 months of last day worked: / / ) WORK STATUS, select one: ☐ Full-Time Regular ☐ Part-Time Regular ☐ Substitute Teacher ☐ Student ☐ Interim ☐ Temporary (Less than 6 months and must indicate date for the end of the term of employment) JOB TITLE: Date voted by Board/Committee START DATE: End Date (if temporary only) NUMBER OF HOURS PER WEEK: **PAY RATE:** ☐ Hourly @ \$ \_\_\_\_\_\_ per hour
☐ Salary @ \_\_\_\_\_\_ % Remuneration (with prior approval of SCC HR & meet minimum amount & EAP status) FILL IN ALL CURRENT INFORMATION **FILL IN REQUESTED CHANGES** 2. CHANGE Do NOT leave blank! If no change, write "no change." Do not leave blank. Current Pay \$\_\_\_\_\_ Change to: \$ \_\_\_\_\_ Change to: \_\_\_\_\_ Current Position: \_\_\_\_\_ Current Hours worked per week: \_\_\_\_\_ Change to: \_\_\_\_ Check one of the options below: EFFECTIVE DATE: ☐ **MOVE** from previous position to **NEW** position ☐ **KEEP** previous position and **ADD** these changes TYPE OF SEPARATION, select one: ☐ Resignation (attach resignation letter) ☐ End of Temporary Position SEPARATION / □ Retirement ☐ End of Contract ☐ Reduction in force (attach prior HR Authorization: do NOT terminate without HR approval) ☐ Dismissal (attach termination letter from board/supervisor – MUST have prior HR authorization) TRANSFER Position held: \_\_\_\_\_ Last day worked: \_\_\_\_\_ WITHIN SCC Forwarding address for final paycheck: APPROVAL: Print Name of signer: FOR SCC OFFICE USE: Conference Treasurer Signature: \_\_\_HR initials: \_\_\_