

Student Employment Change Form

Student Name: _____ ID#: _____ Date: _____

Reason for Change

Resignation (attach resignation)

Change Request(s)	From	To
<input type="checkbox"/> Kronos Supervisor		
<input type="checkbox"/> Job Title		
<input type="checkbox"/> Job Hours per Week		
<input type="checkbox"/> Wage/Salary Rate	\$	\$
<input type="checkbox"/> Account Number	Acct: - -	Acct: - - 0000
<input type="checkbox"/> Other (explain in comments)		
COMMENTS		

Supervisor Signature Name (Please Print) Date

HR Section Only

Terminate: Position: _____ As of: _____ Kronos: Y N

Changes: Pay Rate: _____ Position: _____ Change as of: _____

Hours per day: _____ Hours per Pay Period: _____ Processed Date: _____ Processed by: _____

Notes: