## Change of Status



## **EMPLOYEE INFORMATION:**

Club Name:	Nome:
Title/Position:	Name:
Current Salary/Hourly Rate: \$	Department: ————————————————————————————————————
	Current Status: □Full Time □Part Time
	complete and provide to GM (and VP of Ops if the raise is above late. Email approval is permitted, however, a PDF of the er to be approved.
Note: Address / Phone Number / Email / Direct Deposit / Tax changes should be completed by Team Member in Paycom.	
CHANGE OF STATUS: (Complete Applicable Fields)	
Reason for Change of Status:	ge, Inactive, Leave of Absence, Deceased, Retired, Rehired, Transfer, etc.)
(Rate Change, Status Chan Effective Date of Change:	ge, Inactive, Leave of Absence, Deceased, Retired, Rehired, Transfer, etc.)  New Status: □Full Time □Part Time
New Annual Salary/Hourly Rate: \$	New Title/Position/Dept:
GM: Please update Paycom using Personnel Action Form (Page 1977)	AF) – Employee Position Status Change {For PT to FT, or FT to PT changes}.
CM: Places undeta Payagm using Paragnal Action Form (	PAF) – Change Position and Compensation {For position, rate, dept., pay type
changes }.	— Change Fosition and Compensation (For position, rate, dept., pay type
Paycom – date updated:	
	nange of status:
Date Insurance Deductions were removed or added in	the payroll system:
Transferred to/from another Bobby Jones Links Club (Na	me): Transfer Date:
Please	notify Human Resources.
SEPARATIONS: (Terminations or Resignations)	
Separation Date:	Date of Final Paycheck:
Reason for Separation:	
Date of last paycheck with deductions for insurance /C	Garnishments/Child Support? Date
Insurance Coverage Ends (if applicable):	
GM: Please update Paycom using Personnel Action Form (PAF)	) – Termination {Voluntary / Involuntary}.
Paycom – date updated:	
SIGNATURES:	
Department Head: Date:	
GM: Date:	
VP of Operations: Date:	