

**CITY OF HICKORY  
PAYROLL CHANGE NOTICE**

**Employee Name:** \_\_\_\_\_  
**Department:** \_\_\_\_\_ **Division:** \_\_\_\_\_ **Date Change Effective:** \_\_\_\_\_

**A. Action To Be Taken:**

Enter on Payroll       Change Current Status       Remove From Payroll  
 Last day on Payroll: \_\_\_\_\_

**B. New Hire or Status Before Change:**

Department: \_\_\_\_\_ Position Title: \_\_\_\_\_  
 Pay Grade: \_\_\_\_\_ Salary Rate Per Year: \$ \_\_\_\_\_ Salary Rate Per Hour: \$ \_\_\_\_\_  
 Pay Schedule: Weekly \_\_\_\_\_ Semi-Monthly \_\_\_\_\_  
 Full time \_\_\_\_\_ Part time \_\_\_\_\_ Temporary \_\_\_\_\_

**Status After Change:**

Department: \_\_\_\_\_ Position Title: \_\_\_\_\_  
 Pay Grade: \_\_\_\_\_ Salary Rate Per Year: \$ \_\_\_\_\_ Salary Rate Per Hour: \$ \_\_\_\_\_  
 Pay Schedule: Weekly \_\_\_\_\_ Semi-Monthly \_\_\_\_\_  
 Full time \_\_\_\_\_ Part time \_\_\_\_\_ Temporary \_\_\_\_\_

Reason For Change: \_\_\_\_\_

**C. If Removed From Payroll, Reason For Separation:**

Please explain: \_\_\_\_\_

Did Employee Give Two Weeks Notice?     No     Yes     Discharges  
 All City Property Returned?     No     Yes    If No, What Has Employee Not Returned? \_\_\_\_\_

Would You Rehire This Employee?     No     Yes  
 If No, please explain: \_\_\_\_\_

Vacation / Compensatory Time Due: \_\_\_\_\_

<b>REQUIRED APPROVALS</b>		DEPARTMENT HEAD	DATE
TRANSFERRING DEPT.	DATE	HUMAN RESOURCES	DATE
SUPERVISOR	DATE	CITY MANAGER	DATE