UNIVERSITY of WISCONSIN-GREEN BAY

Student Employment Change Form

Instructions:

1. List in alphabetical order by last name for multiple student employee changes.
2. Route completed and signed form to the Human Resource Office at least 1 week prior to effective pay period begin date.
   Refer to the Student Bi-weekly Pay schedule for exact dates: http://www.uwgb.edu/hr/payroll/#schedules

Required Fields for All Types of Changes					Required fields if making BUDGET CHANGES			Required fields if making WAGE RATE CHANGES			Required field to END JOB
(Alpha Order) Last Name	First Name	Empl ID	Empl Record	Working Title	Effective Date	Current Budget (xxx-xxxxxx-x)	New Budget (xxx-xxxxxx-x)	Effective Date	Current Hourly Rate	New Hourly Rate	Actual Last Date Worked
				(Select One)							
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				(Select One)							

Supervisor Signature *(required):* _____ Date:_____

Budget Approval Signature *(required):*_____ Date:_____

Questions, please contact the Human Resource Office at ext. 2839 or email at hr@uwgb.edu

FOR HR USE ONLY

Date Entered: _____

Entered by: _____

Office of Human Resources
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