Job Change (with a Position)

Employee Name:	Empl ID:	Empl Rcd#:

Business Unit:	Department:

Note: If there are multiple changes with different Actions/Reasons on the same date, use multiple forms noting the Effective Sequence.

Work Location

Effective Date: _____ mm/dd/yyyy   Effective Sequence: _____ 0, 1, 2, etc.

Action: _____   Reason: _____

Expected Job End Date: _____ mm/dd/yyyy   Expected Return Date: _____ mm/dd/yyyy

Position Number: _____

Job Information

Seasonal? _____   Number of Months: _____   Officer Code: _____

UWC/UWEX Program Area: _____

Compensation

Frequency: _____

Pay Components

Amounts ▶   Rate Code: _____   Comp Rate: _____

Changes ▶   Rate Code: _____   Change Amount: _____

UW Custom Data

Probation

Probation Type: _____   Probation End Date: _____ mm/dd/yyyy

Rate Exceptions   Additional

◯ Under Min   ◯ Over Max   Working Title: _____

Encumbrances

Year: _____   Session: _____

Job Change (with a Position)

Employee Name: Empl ID: Empl Rcd#:

Business Unit: Department:

UW Benefits

Benefits Intention:		Rehired Annuitant:	
Previous WRS State Service:		Visiting from Other Institution:	
Previous WRS Local Service:		Work Out of State Required:	

Employment Data

Criminal Background Check Date: _____ mm/dd/yyyy

☐   Accrue Tenure Services

FTE for Flex Service Accrual: _____ 0.000000

Name: _____   Signature: _____   Date: _____ mm/dd/yyyy

_____   _____   _____

For Office Use Only

Update Completed for Empl ID: _____   Empl Rcd#: _____

Processed By: _____   Date: _____