

Change of Status Form
Temporary and On-call Employees
For use within MSU Extension Only

This form should be used to make an **employment change** to a **current / active temporary or on-call employee**.

This form must be completed and submitted a minimum of two **(2) weeks prior to the effective date of the change**. To submit the form, you can either click the icon at the bottom of the form, or send to MSUE.TOC.Student@msu.edu.

*For additional information, please refer to the **MSUE Employment Guide for Temporary and On-call Employment**, located on the **MSUE HR OD web page**: http://od.msue.msu.edu/human_resources/internal_hiring_procedures_forms.

*Fields in red are required

EMPLOYEE INFORMATION

First Name:

Last Name:

MSUE Institute/Organizational Unit:

Program/Initiative:

Work Location (building/address)

On-campus:

Off-campus: County

District

Work Location Phone number:

TYPE OF CHANGE *If temporary or on-call employee will be changing job duties/ job titles along with any of these changes, please reach out to MSUE HR prior to form submission as position may need to be posted.

Employment Type Change (i.e. temporary to on-call or vice versa)

Current Employment Type:

New Employment Type:

Effective Date for this Change:

Employment Percent Change (increase or decrease of employment percent/hours worked per week)

Current Employment Percent:

New Employment Percent:

Effective Date for this Change:

Pay Rate Change

Current Rate of Pay:

New Rate of Pay:

Effective Date for this Change:

Supervisor Change

Current Supervisor:

Institute/Organizational Unit of **Current** Supervisor:

New Supervisor:

Institute/Organizational Unit of **New** Supervisor:

Effective Date for this Change:

Justification for this change:

Name of supervisor or person requesting this change:

Date:

Signature of supervisor or person requesting this change:

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Approvals:

FO

ID and/or DD

HR

Notes/Comments: