



Employee Last Name		First	MI	Shop#
Salary--Range, Step, Monthly/Hourly Rate, FTE (%)				Start Date mm/dd/yy
<input type="checkbox"/> New Employee <input type="checkbox"/> Transfer from another State agency: <input type="checkbox"/> Promotion <input type="checkbox"/> Transfer from another UW Dept:			Shift Differential <input type="checkbox"/> Yes <input type="checkbox"/> No	
Job Classification (e.g., 8855 Painter)		Budget Number: Position No. (Required for salaried positions) Person Replaced		
UWID if known: :		PID if known:	Student Number:	
Address, Street, City, State, Zip			Home Phone	
<input type="checkbox"/> Permanent: Orientation sign up coordinated through Training & Development Office <input type="checkbox"/> Temporary: Sign up by Shop Program Support or Facilities Services Business Office Documentation of Citizenship and Employment Eligibility is REQUIRED prior to any work assignments.				

SEPARATION/TRANSFER

Name	UWID	Job Classification
End Date	Budget Number	<input type="checkbox"/> Permanent <input type="checkbox"/> Temporary/Student
Reason <input type="checkbox"/> Resigned <input type="checkbox"/> End of Appointment <input type="checkbox"/> Temporary to Permanent <input type="checkbox"/> Terminated for Cause <input type="checkbox"/> Retired <input type="checkbox"/> Promotion <input type="checkbox"/> Lack of Work <input type="checkbox"/> Transfer to other Non-FS Dept Other:		
Checkout Procedures for: keys, tools, permits, ID cards, and computer accounts completed? <input type="checkbox"/> Y <input type="checkbox"/> N		

Signature of Manager	Date
Signature of Director	Date

cc: Employee file
Manager/Supervisor File

**Send Original to: Facilities Services , Box 355217
Attention: Grace Lim**