

## **Human Resource Services**

Certificated
Classified
Payroll Team:

Name:	
Date to Payroll:	
Pav Cvcle:	

## **Payroll Update Sheet**

Name (First / Last)	SSN	Loc	New Emp	Trf	Sep	LOA	Status Chng	Other Transactions	Effective Date	Comments
									Fr:	
									То:	
									Fr:	
									То:	
									Fr:	
									To:	
									Fr:	
									То:	
									Fr:	
									То:	
									Fr:	
									То:	
									Fr:	
									To:	
									Fr:	
									To:	
									Fr:	
									To:	

<u>Distribution</u>: One Copy to: Payroll Services; Employee Benefits; Substitute Office; Human Resource Services/Labor Relations Assistants; Credential Specialist (Certificated Only)