

EMPLOYEE STATUS REPORT

STORE NO. _____
LOCATION _____

APPROVED BY
MANAGER _____
AREA MANAGER _____
HOME OFFICE _____

NAME: _____ DATE OF BIRTH: _____

STARTING SALARY

EFFECTIVE DATE _____ CHECK HERE IF REHIRE _____
STARTING WEEKLY SALARY _____ OR HOURLY WAGE _____

RAISE REQUEST

EFFECTIVE DATE _____
WEEKLY SALARY: FROM _____ TO _____
HOURLY WAGE: FROM _____ TO _____

TRANSFER (SENT FROM NEW STORE)

EFFECTIVE DATE _____
FROM (LOCATION) _____
TO (LOCATION) _____

TERMINATION

EFFECTIVE DATE _____
REASON FOR SEPARATION: QUIT _____ FIRED _____ OTHER _____
EXPLANATION _____