**Employee Change Form**

|  |  |
| --- | --- |
| **Employee Name:**       | **Client Company:**  |
| **Last 4 of Social Security Number:**      | **Employee Number:**  |
| **Effective Date:**       |  |

### PERSONNEL / PAYROLL CHANGE

|  |  |  |  |
| --- | --- | --- | --- |
| **Action Taken:**  |  | **FROM** | **TO** |
|  | [ ]  Position / Title Change |       |       |
|  | [ ]  Leave of Absence |       |       |
|  | [ ]  Address/Phone Change – Complete Below |       |       |
|  | [ ]  Pay Change |       |       |
|  | [ ]  Separation – Complete Below |       |       |
|  | [ ]  Workers’ Compensation Code |       |       |
|  | [ ]  Employee Status (Full-time, Part-time) |       |       |
|  | [ ]  Department Change |       |       |
|  | [ ]  Other Action |       |       |
| **Additional Comments:**  |
|       |
|       |
| **Address/Phone Change:** |
|  |

**TERMINATION OF EMPLOYMENT**

|  |  |
| --- | --- |
| **Last Day Worked:** | **Employee Was:** [ ]  Full-time [ ]  Part-time  [ ]  Temporary [ ]  Other |
| **Check One:** [ ]  Voluntary [ ]  Involuntary |  |
| **Was termination conducted in cooperation with your (or another) Xenium Business Partner?**[ ]  Yes [ ]  No **If yes, with whom did you collaborate?**  |
| Termination Reason | **Termination Reason** | Termination Reason | **Termination Reason** |
| [ ]  Resignation – Other Position | [ ]  Violation of Company Policy-See File | [ ]  Staff Reduction | [ ]  Terminated-Continue Commission Pay |
| [ ]  Resignation | [ ]  Unsatisfactory Performance | [ ]  Employee not worked in 60 days | [ ]  Mutual Agreement to Separate |
| [ ]  Returned to School | [ ]  Attendance | [ ]  Leave of Absence | [ ]  Retired |
| [ ]  Elimination of Position | [ ]  Reduction In Force | [ ]  Temporary Assignment | [ ]  Death |
| [ ]  Job Abandonment | [ ]  Lay-Off | [ ]  Transfer | [ ]  Other       |
| [ ]  Misconduct |  |  |  |
| **Additional Comments:****Ryan has 49.89 hours due as well as any PTO time he has available.** |
|       |
|       |
|       |

##### SIGNATURES

|  |  |  |
| --- | --- | --- |
| **Employee Signature** | **Client Representative Signature** | **Xenium Representative Signature** |
|       |       |       |
| Date:      | Date:      | Date:       |