MOTT COMMUNITY COLLEGE

Employee Transaction Form

Name TIMOTHY TUCKER Employee ID 0040212

TRANSACTION TYPE

☐ New Hire ☐ Rehire ☑ Job Change/Reclassification ☐ Title Change ☐ Additional Assignment

☐ Dept/Location Change ☐ Account No. Change ☐ Salary/Wage Change ☐ Other Payment *(Explain under Comments)*

☐ Leave of Absence (Paid) ☐ Leave of Absence (Unpaid) ☐ Termination *(Specify Reason Type under Comments)*

☐ Other *(Please specify)* _____

Effective/Start Date 08 01 06 End Date ☐☐ ☐☐ ☐☐

Comments _____

CURRENT	NEW
Status: ☑ Full-time ☐ Temporary Full-time ☐ Part-time ☐ Temporary/On-call/Contingent ☐ Other _____	Status: ☑ Full-time ☐ Temporary Full-time ☐ Part-time ☐ Temporary/On-call/Contingent ☐ Other _____
Classification: ☐ Exempt ☐ Faculty ☐ M&O ☐ ProTech ☐ PSO ☑ Sec/Clerical ☐ S&M ☐ Non-Union	Classification: ☐ Exempt ☐ Faculty ☐ M&O ☐ ProTech ☐ PSO ☑ Sec/Clerical ☐ S&M ☐ Non-Union
Division/Department OFFICE OF CFO	Division/Department ATHLETICS
Campus/Location MAIN CAMPUS	Campus/Location NO CHANGE
Position Title ADMIN ASST I - CFO	Position Title ADMIN ASST II - ATHLETICS
Position Code *(For HR Use)* _____	Position Code *(For HR Use)* _____
Grade C1 Step 6	Grade D Step 7
Salary, Hourly Rate, or Payment Amount $ 32,580	Salary, Hourly Rate, or Payment Amount $ 35,325
FTE 1.00	FTE 1.00
Account Number(s):	Account Number(s):
1) 01 20010 21410 100 %	1) 01 52010 21410 100 %
2) _____ _____ _____ %	2) _____ _____ _____ %
3) _____ _____ _____ %	3) _____ _____ _____ %
4) _____ _____ _____ %	4) _____ _____ _____ %
5) _____ _____ _____ %	5) _____ _____ _____ %

Comments _____

FOR PAYROLL USE

Retirement Code ☐ Retirement Class ☐☐☐☐ Date of one-time payment ☐☐ ☐☐ ☐☐

Entered by _____ Date _____

Requesting Manager/Supervisor _____ Date _____

Vice President/Executive Dean _____ Date _____

Human Resources _____ Date _____

White - Payroll *Yellow - HR* *Pink - Department*