

GREATER

## **Employee Change of Status Form**

Employee Name:	l	Phone Number:
Address:	I	Effective Date:
Instructions: Check the appropris	ate box and fill in the informa	tion below. Employee signs only if
they initiate action or a payroll de	eduction is required. Superviso	or signs in all cases.
□ Transfer	□ Review	□ Promotion
☐ Benefit Change	□ Adjustment	□ Classification
□ Address Change	☐ Payroll Deduction	n
EMPLOYMENT CHANGES New Title:		New Manager:
New Classification:  □ Full Time		Part Time
New Wage Rate:		Percentage Change:
New Status:  □ Exempt		Non Exempt
Instructions:		
BENEFIT CHANGES: Benefits Affected: N/A   Medical  Dental		Life Simple IRA
Manager's Signature:		Date:
Human Resource's Signature:		

Promotion Introductory Period: All newly promoted employees, regardless of employee status are required to complete a minimum ninety (90) introductory period from the date of promotion. This is a get acquainted period to help you decide if you are satisfied with your job and to help your supervisor evaluate your performance and compatibility with the job duties and skills required. During the introductory period, the employee may be terminated with or without corrective disciplinary action procedures. It is important to remember that an employee is not guaranteed employment for the entire Introductory Period. Equally important, completion of the Introductory Period does not guarantee your employment with the Company for any period thereafter.

We recognize that you retain the option, as does Wogan Group, of ending your employment with Wogan Group at any time, with or without notice and with or without cause. As such, your employment with Wogan Group is at will, and neither this letter nor any other oral or written representations may be considered a contract.

