

COLGATE UNIVERSITY
Casual Wage Employee Change of Status

CONFIDENTIAL

Please complete the top section of this form, save document to your hard drive for future reference, and send electronically to Human Resources at humres@colgate.edu. Please use "Casual Wage Employment" as the subject line.

New Hire Additional Change Termination

Colgate ID# _____ Current Email Address _____

Employee Name _____

Position Title _____

Department _____

Start Date _____ End Date _____

Pay Type: Hourly Other
Hourly Rate \$ _____ Stipend (total) \$ _____

Anticipated Hours Per Week: _____

Driving Colgate Vehicle: Yes No

Reason for Hire/Change/Termination _____

Time Sheet Approver _____

FOAP: _____
Fund Org Account Program Hiring Manager's Name Date

For HR Use

Position # _____ Payroll ID B1 B2 M1
Time Sheet Org _____
Begin Date _____
End Date _____
Human Resources Date

Special Pay Schedule

Total Payment Amount \$ _____		Default Earnings: _____			
____/____/____	____/____/____	____/____/____	____/____/____	____/____/____	____/____/____
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
____/____/____	____/____/____	____/____/____	____/____/____	____/____/____	____/____/____
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

Background check _____ Eclass _____ LCAT: _____ Date to Payroll: _____