



# Employee Change Form

Date \_\_\_\_\_ Client Name \_\_\_\_\_ Client # \_\_\_\_\_

## Employee Information

Employee ID \_\_\_\_\_ Employee Name \_\_\_\_\_

- Name change \_\_\_\_\_
- Address change \_\_\_\_\_  
\_\_\_\_\_
- Department add/change From \_\_\_\_\_ To \_\_\_\_\_
- Pay Rate change From \$ \_\_\_\_\_ To \$ \_\_\_\_\_ per hour/per year
- Tax withholding changes – Submit new **W-4** form for **Federal Withholdings**  
Submit new **M-4** form for **State Withholdings**

***\*Tax withholding changes MUST also be submitted on the above forms  
Each new submission replaces ALL previous withholdings***

- Deduction add/change (specify deduction name)  
Deduction \_\_\_\_\_ Amount/percent \_\_\_\_\_  
Deduction \_\_\_\_\_ Amount/percent \_\_\_\_\_
- Termination Date: \_\_\_\_\_

***Note: Direct Deposit changes must be submitted on the Employee Direct Deposit Authorization form.***

Submitted by \_\_\_\_\_ Date \_\_\_\_\_

Entered by \_\_\_\_\_ Date \_\_\_\_\_

Scanned by \_\_\_\_\_ Date \_\_\_\_\_