



PAYROLL FORM

- NEW EMPLOYEE
- CHANGE EXISTING EMPLOYEE

EMPLOYEE NAME Jade Kreuger

TO BE COMPLETED BY SUPERVISOR

Start Date: _____

Department: Planning

Position: Planning Administrator

Base hours per week: 40

Current Status Full Time Part Time no benefits

REQUEST EFFECTIVE DATE: Feburary 26 24

ALL NEW HIRES & PAY INCREASES MUST BE APPROVED BY THE BOARD OF COUNTY COMMISSIONERS

Pay Rate: no change Hourly

no Change Salaried

Employee Pay Grade: _____

Pay Rate is _____ % of market rate

Budget Account # _____

FUND DEPT ACCOUNT

PAYROLL CHANGES CAN ONLY OCCUR AT THE BEGINNING OF A NEW PAY PERIOD

Change Rate of Pay:

- Merit Increase (attach Performance Evaluation)
- Promotion Other _____
- From pay grade 11
- To pay grade 12
- Exempt

FALSE Termination (Must attach Employee Separation Report):

Last Day Worked: _____

- Voluntary
- Discharged
- Laid Off

Comments: **This is a temporary increase in pay, the difference to be paid from the Misdemeanor Vacancy untill the Misdemeanor position is filled.**

TO BE COMPLETED BY EMPLOYEE

Mailing Address: _____

City, State, Zip: _____

Physical Address: _____

City, State, Zip: _____

Email Address: _____

Telephone: _____

Emergency Contact: _____

ER Contact phone #: _____

TO BE COMPLETED BY PAYROLL DEPARTMENT

DATE OF FIRST PAYCHECK: _____

INSURANCE ELIGIBILITY DATE: _____

- W-4
- I-9
- Supporting ID for I-9
- Direct Deposit
- Personnel Manual Acknowledgement
- PERSI Forms 118 for Law Enforcement
- Seasonal Form
- Report New Hire to ID Dept. of Labor
- Add Benefit Sick Leave Hrs.
- Notify I.T. Facilities R&B
- Contact AFLAC representative
- Contact NBS (Laura Woolston)

Accrual Activation Date for Benefited Employee _____

Entered by: _____ Date: _____

SIGNATURE

Submitted by: Dan Reyes, County Manager Date 2/23/24

Approved by the Board of County Commissioners: _____ Date _____

Deliver this original form to the Payroll Department