

Change of Status Form

Student Employee

For use within MSU Extension Only

This form should be used to make an employment change to a current / active student employee.

This form must be completed and submitted a minimum of two (2) weeks prior to the effective date of the change. To submit the form send to MSUE.TOC.Student@msu.edu.

*For additional information, please refer to the **MSUE Employment Guide for Student Employment**, located on the **MSUE HR OD web page**: http://od.msue.msu.edu/human_resources/internal_hiring_procedures_forms.

**Fields in red are required*

EMPLOYEE INFORMATION

First Name:

Last Name:

MSUE Institute/Organizational Unit:

Program/Initiative:

Work Location (building/address)

On-campus:

Off- campus: County

District

Work Location Phone number:

TYPE OF CHANGE

Pay Rate Change

Current Rate of Pay:

New Rate of Pay:

Effective Date for this Change:

Supervisor Change

Current Supervisor:

New Supervisor:

Effective Date for this Change:

Institute/Organizational Unit of **Current** Supervisor:

Institute/Organizational Unit of **New** Supervisor:

Justification for this change:

Name of supervisor or person requesting this change:

Date:

Signature of supervisor or person requesting this change:

For use by MSU Extension HR Only

Approvals:

FO
ID and/or DD
HR

Notes/Comments: