

PAYROLL STATUS CHANGE FORM FOR SELF DETERMINATION

Managing Parties should complete this form to adjust an employee's pay rate, rehire an employee, hire an existing employee or terminate an employee. Once completed submit to the Mains'l Manager.

Employee Information:

State: CA SDP Program Model: Co Employer (FMS) Sole Employer (FEA)

Employee Name: _____ Employee #: _____

Payroll Change

Wage Adjustment: List new pay rate and service code(s): _____
Participant Name & Number: _____
Effective Date of New Rate: _____
Pay Code used in Timesheet System: _____

*All pay rate changes must be submitted no later than the pay period prior to the change taking affect. Pay rate changes can only begin on the first date of a pay period (1st or 16th of the month).

Rehire: Effective Date of Rehire: _____

*Employees who have been inactive for 6 or more months will need to complete new hire paperwork

Add a Position: Dept #: 503 Participant Name & Number: _____
Hourly Pay Rate: _____ Service Code (s) Used: _____
Pay Code used in Timesheet System: _____

* Co Employer: Some employees may have additional paperwork required.

*Sole Employer: All Employees need to complete a new hire packet; employees cannot be added using this form Please connect with your Mains'l manager for any additional documents needed.

Notes/Comments:

Managing Party Completing Form: _____ Date: _____

Mains'l Manager: _____ Date: _____

Mains'l Manager will submit for to payroll for processing