Middlebury Institute *of*
International Studies at Monterey

EMPLOYEE STATUS CHANGE

Employee Name:	Supervisor:		Oracle Person #:
Department:	☐ Faculty/Staff	☐ GA/GRA	Position:
Effective Date of Change:	End Date (if applicable):		

I – Supervisor

From:	To:

II – Hourly Rate/Salary*

Current Rate/Salary: $	Proposed Rate/Salary: $
Reason:	

III – Hours Scheduled or FTE*

Present Hours/Week or FTE:	Proposed Hours/Week or FTE:
Temporary Change? ☐ Yes ☐ No	If Yes, End Date:
Reason:	

IV – Department

From:	To:

EDORDA

From:	To:

V – Title (Update Job Description in PeopleAdmin)*

From:	To:

VI – Separation*

Employee's Last Day of Work:
Reason: ☐ End of Agreement ☐ Resignation ☐ Other:

VII – Other Employment Action

Action:
Explanation:

Supervisor Signature:	Date:
Authorization (VPAA, Executive Director, Dean, CNS Director/Deputy Director or designate):	Date:
Human Resources:	Date:

*Consult with Human Resources