

# PERSONNEL CHANGE OF STATUS

**Name:**

**HR/CMS ID#:**

**Type of Change:**

End of Contract

Resignation

Retirement

Leave of Absence:

Sabbatical

Reclassification- New Title:

To Grade:

Interval/Step:

Department Change

Salary Change

Title Change

Supervisor Change

Other

**Comments:**

**Effective Date:**

**Ending Date (if applicable):**

**Salary Change (if applicable) - From: \$**

To: \$

Amount of Change: \$

**Retro Due: \$**

**Explanation of Retro Pay:**

Source of Funds #	Department #	Percent

**Requested by:**

*(Must be a Supervisor, Dean, or Head of Dept)*

Date

Printed Name

**Certified by :**

Vice President of Applicable Department

Date

Printed Name

Vice President of Administration & Finance

Date

Business Office Designee *(IF grant funded)*

Date

**Approved by:**

President of Berkshire Community College

Date

**Received by:**

Director of Human Resources

Date

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**NOTIFICATIONS WHERE APPLICABLE:**

Union/Sr. List	Appt. Letter/Memo	Catalog	Evaluation Schedule	Phone List
Dept/Division	Mail Services	IT/Email/Phone	Web page(s)	Facilities
HR/CMS	Colleague	Org Chart		

**Original:** HR   **Copy:** Payroll