

Sample C Graduate Student
Name Change

KANSAS STATE UNIVERSITY
CHANGE OR SEPARATION FORM (excludes hourly students)

CURRENT INFORMATION:

EMPLOYEE NAME:			
(first,middle,last,suffix)			
DEPARTMENT ID	DEPARTMENT NAME	EMPLOYEE ID	RCD #
EFFECTIVE DATE:	POSITION NO.:	9-MONTH	
		12-MONTH	
CLASSIFIED	UNCLASSIFIED	GRADUATE STUDENT	
JOB CODE:	JOB TITLE:		

HOME ADDRESS CHANGE : (Address where paycheck or advice, W-2's, etc. are sent.)

ADDRESS 1:	ADDRESS 2:
CITY:	COUNTY: ZIP CODE:
STATE:	HOME PHONE:

Withhold Home Address/Phone in Campus Phone Book? Yes No

DEPARTMENTS MAY UPDATE ADDRESSES IN HRIS DURING THE SECOND WEEK OF EACH PAY PERIOD.

CHANGE: (Select Type of Action and Enter Correct Information)

Name (attach copy of Social Security Card):	
Personal Change:	Citizenship Visa Type
	Military Status Marital Status
Pay Rate Change (Bi-Weekly):	Reason: From: To:
Pay Rate Change (Hourly):	Reason: From: To:
Preferred Name:	
Return From Leave:	
Reappointment (for temporary classified & unclassified) – End of Appointment Date:	
FTE Change:	From: To: Benefit Program:
Other – Explain:	

SEPARATION: (Select Appropriate Action)

Resign – Other (RS0)	End of Temporary Appointment (ETM) - no benefits
Resign – Family Reasons (RS1)	End of Term Appointment (ELT) - benefits
Resign – Job Abandonment (RS2)	Retirement (RET) (REG)
Resign – Health Reasons (RS3)	Death (DEA)
Resign – Personal Reasons (RS4)	Layoff
Resign – Other Position (RS5)	Separation to New Agency (indicate new agency)
Resign – Mutual Consent (RS6)	Leave of Absence – for more than 30 days
Resign – Return to School (RS7)	Dismissal – Personal Conduct (CON)
Resign – Dissatisfied w/Work (RS8)	Dismissal – Unsatisfactory Work Performance (UNS)
Resign – Dissatisfied w/Pay (RS9)	

Additional Comments: _____

EMPLOYEE SIGNATURE _____

DATE _____

SIGNATURE(S) OF UNIT OR DEPARTMENT HEAD, DEAN, AND/OR VICE PRESIDENT _____

DATE _____