**Stewart County Board of Education**

**2021-2022 Employee Change of Status Form**

Employee Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Effective Date for Change of Status:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current Assignment**

School:

Position:

Contract Pay Rate:

Contract Days:

Contract Hours/Day:

**New Assignment**

School:

Position:

Contract Pay Rate:

Contract Days:

Contract Hours/Day:

Paid Holidays:

Staff Development Days:

Total Days Paid:

Total Salary:

Sick Days:

Additional Assignments and Compensation:

Employee Signature: Date:

Signature of Supervisor: Date:

Finance Director: Date:

Payroll Department: Date:

*\*A copy of this completed form is to be forwarded to the secretary of the school where the employee is assigned and the original placed in the employee’s personnel file.*