

**Business Office**

Employee Hire, Change, Termination Form

2500 E. Nutwood Ave.
Fullerton, CA 92831 USA
(714) 879-3901
FAX (714) 681-7512

☐ Hire ☐ Cost of Living Adjustment ☐ Termination (must supply reason) ☐ Formal Leave ☐ Staff
☐ Rehire ☐ Classification Change Reason: _____ ☐ Admin.
☐ Merit Increase _____ ☐ Faculty
☐ Other _____ Anticipated return date: _____ ☐ HIU Student

Name: _____ ID #: _____ Effective Date: _____

Ledger Acct #: _____	HR Use Only	Comments
Job Title: _____	Benefits: Start date _____ End date _____	_____
☐ Full Time ☐ Part Time* ☐ Seasonal*	☐ Medical	_____
☐ Exempt ☐ Non-Exempt	☐ Dental	_____
*Average hours per week: _____	☐ Life/Disability	_____
Hourly Semi Monthly Rate	W/C Classification Code	_____
Base Rate	_____	_____

Signatures/Approvals

Supervisor: _____ Date: _____
Human Resources: _____ Date: _____
Administrator: _____ Date: _____

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