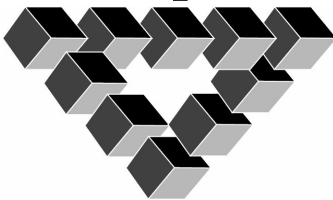


StaffScapes, Inc.



1070 W 124th Ave., Ste 900 Westminster CO 80234
Phone: (303) 466-7864; Fax: (303) 466-7947

EMPLOYEE STATUS CHANGE FORM

Client Name: _____ Date: _____
Employee Name: _____ Soc Sec #: _____

Personal Information

Name Change: _____ New Phone: _____
New Address: _____

Payroll Information

Prior Rate of Pay: _____ New Rate of Pay: _____
Prior Job Description: _____ New Job Description: _____
Prior Department: _____ New Department: _____
Date the Status Change is to Take Effect:
 Pay Period Status Change is to Occur: _____ (first day of pay period with the change)
 Pay Date Status Change is to Occur: _____ (first check with the pay change)

Comments: _____

Supervisors Signature: _____ Date: _____