

Employment Change

Employee ID:

Empl Record:

Effective Date: _____ m m / d d / y y y y

Employee Name _____ Social Insurance Number _____

District (Company Code)

School (Location Code)

Leave		Effective date for going on leave must be the day after last day worked	
Actions:	Reasons:		
<input type="checkbox"/> LOA <small>Leave of Absence-Unpaid</small>	<input type="checkbox"/> Education Leave (EDU) <input type="checkbox"/> Maternity Leave (MAT)	<input type="checkbox"/> Parental Leave (PAR) <input type="checkbox"/> Secondment (SEC)	<input type="checkbox"/> Unpaid - w/Benefits & No Service Break (UL1) <input type="checkbox"/> Unpaid - Extended Sick Leave (USL)
<input type="checkbox"/> PLA <small>Leave of Absence - Paid</small>	<input type="checkbox"/> Education Leave -Paid (EDU) <input type="checkbox"/> Injury on Duty (IOD)	Expected Date of Return _____ <small>m m / d d / y y y y</small>	<input type="checkbox"/> Extended Sick Leav (PES) <input type="checkbox"/> Deferred Salar (DSL) Expected Date of Return _____ <small>m m / d d / y y y y</small>
<input type="checkbox"/> SUS <small>Suspension</small>	<input type="checkbox"/> Disciplinary Action W/O Pay (DAC) <input type="checkbox"/> Suspension With Pay (SWP)		

Return from Leave	
Actions:	Reasons:
<input type="checkbox"/> RFL <small>Return From Leave</small>	<input type="checkbox"/> Return from Deferred Salary (RDS) <input type="checkbox"/> Return from Paid Leave (RPL) <input type="checkbox"/> Return from Unpaid Leave (RFL) <input type="checkbox"/> Reinstatement from Suspension (RFS)

Transfer	
Actions:	Reasons:
<input type="checkbox"/> XFR <small>Transfer</small>	<input type="checkbox"/> Same Job Group Different School (DDS) School (Location) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> Different Job Group Different School (New Empl Instance) School (Location) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> Same Job Group Same School (DSS) <input type="checkbox"/> Different Job Group Same School (New Empl Instance)

Data Change	
Actions:	Reasons:
<input type="checkbox"/> DTA <small>Data Change</small>	<input type="checkbox"/> Change in Standard Hours <input type="checkbox"/> Change in Employment Status (Part-time/Full time) <input type="checkbox"/> Other _____ <input type="checkbox"/> Change Reg/Temp Status Replacement Empl ID _____ Replacement Empl Rcd _____ Replacement Empl Name _____

Job Code / Description									
Teacher Job Group	Hrs/Wk	Teacher Job Group	Hrs/Wk	Teacher Job Group	Hrs/Wk	Exec Job Group	Hrs/Wk	Exec Job Group	Hrs/Wk
23-Program Specialist		33-Inclusive Ed Dev		55-Visually Impaired		21-Director		89-Asst Dir HR (PSPP)	
24-Guidance Counsellor		34-Student Support		57-English Second Lang		22-Asst Director HR(TPP)		90-Asst Dir Ops (TPP)	
25-Specialist		35-Teaching Principal		59-Distance Education		80-Instruct Ed Off (IEO)		96-Bridging Exec (PSPP)	
26-Principal		50-Pervasive Aboriginal		60-French Federal		81-Reg Ed Off (REO)		98-Bridging Exec (TPP)	
27-Vice Principal		52-Educational Psych		61-Audio Verbal Therapist		82-Senior Ed Off (SEO)			
28-Department Head		53-Speech Pathologist		99-Miscellaneous		83-Asst Dir Finance			
29-Special Education		54-Hear Impaired		Teacher Learning Assistant		84-Asst Dir Programs		Student Asst Job Group	
30-Classroom Teacher		31-Mathematics		38-Teacher Learning Asst.		88-Assoc Dir of Programs		97-Student Assistants	

Comments: _____

District Authorizing Signature: _____ Date: _____

Workforce Use Only	
Workforce Changes Completed By: _____	Date: _____

Teachers Payroll Office Use Only			
Deduction - Union Code			
<input type="checkbox"/> U00007 - Nape	<input type="checkbox"/> U00018 - NLTA Labrador West	<input type="checkbox"/> U00017 - NLTA Provincial	<input type="checkbox"/> F00008 - NL School Board Association

Other Earnings		Isolation Allowance		Labrador Allowance		
Annual Amt						
<input type="checkbox"/> A36 - Wage Diff		<input type="checkbox"/> A37 - Group 1 BW <input type="checkbox"/> A38 - Group 2 BW		<input type="checkbox"/> A28/A52 Group 1 Single BW <input type="checkbox"/> A29/A53 Group 1 Family BW	<input type="checkbox"/> A30/A54 Group 2 Single BW <input type="checkbox"/> A31/A55 Group 2 Family BW	<input type="checkbox"/> A32/A56 Group 3 Single BW <input type="checkbox"/> A33/A57 Group 3 Family BW

Admin Bonuses					
		Annual Amt			Annual Amt
<input type="checkbox"/> B12 Secondment Bonus			<input type="checkbox"/> B16 Specialist Bonus		<input type="checkbox"/> B20 Education Psychologist Bonus
<input type="checkbox"/> B13 Misc Bonus			<input type="checkbox"/> B17 Principal Bonus		<input type="checkbox"/> B21 Sole Charge Principal Bonus
<input type="checkbox"/> B14 Program Coordinator Bonus			<input type="checkbox"/> B18 Vice Principal Bonus		
<input type="checkbox"/> B15 Guidance Counselor Bonus			<input type="checkbox"/> B19 Dept Head Bonus		

Special Leave Codes						BW Amt	
Deferred Salary		BW Amt	Education		BW Amt	Workers's Comp (IOD)	BW Amt
<input type="checkbox"/> D02 Def Salary Pay Period Amt TE			<input type="checkbox"/> R31 Education Leave			<input type="checkbox"/> R05 Workers Comp (Reg Teach)	
<input type="checkbox"/> D06 Defer Sal Int Earned Teachers			<input type="checkbox"/> R32 Additional Pay No Pay Benefits			<input type="checkbox"/> R32 Additional Pay No Pay Benefits	
<input type="checkbox"/> R32 Additional Pay No Pay Benefits						<input type="checkbox"/> R05 Workers Comp (SA 5 hrs or more)	
						<input type="checkbox"/> R06 Regular Non Pay (Benefits)	
						<input type="checkbox"/> R28 Workers Comp (SA less than 5hrs)	
						<input type="checkbox"/> R29 Regular Non Pay (Benefits) MPP	

Payroll Changes Completed By: _____
 Date: _____