

PERSONNEL CHANGE OF STATUS FORM



Please indicate the changes below and obtain the appropriate signatures before submitting to Human Resources. Turn in the printed form or scan and e-mail a PDF of the completed form to HR@brentwoodbaptist.com.

Employee Name:

Campus:

Change is effective beginning on:

Reason For Change

Employee Type

Minister Status

Full Time

Not Ordained (Withhold taxes)

Part Time (hours per week)

Ordained (Do not withhold taxes)

Job Title

Budget Account*

* if funded from Ministry Budget

Payment Information

Payment Amount

OR

Hourly Wage

Payment Type

Bi-weekly (Pay Period)

Yearly (Annual Salary)

Extended Leave of Absence

From:

To:

Reason:

Notes (include any other information about the change of status not included above)

Department Head (Senior Leadership) Approval

Executive Pastor's Office Approval

Signature

Date

Signature

Date

Printed Name

Both signatures required

Updated 04/29/2015