

NAME

TITLE

HIRE DATE

RE-HIRE DATE

SUPERVISOR

EMPLOYEE #



CANKDESKA CIKANA
COMMUNITY COLLEGE

Serving Spirit Lake Tribe 1974-2024

Check all that apply

Full Time		Type in Shaded Area Only
Part Time		
Temporary		
Fed Work Study		
Student		
90 Day Probation		
Other		

Pay Allocation	%	(one line for each program if split)		
Program			Acct#	
Program			Acct#	
Program			Acct#	
Program			Acct#	
Program			Acct#	
Exempt Salary				
Non-Exempt (Salary)				
Rate of Pay (hourly)				

CHANGE TO: (Title)

Check all that apply

Full Time		Type in Shaded Area Only
Part Time		
Temporary		
Fed Work Study		
Student		
Other		

Pay Allocation	%	(one line for each program if split)		
Program			Acct#	
Program			Acct#	
Program			Acct#	
Program			Acct#	
Program			Acct#	
Exempt Salary				
Non-Exempt (Salary)				
Rate of Pay (hourly)				

Reason for Change:

90 day Prob End		Resigned	
Promotion		Terminated	
Transfer		Temp Position Ended	
Annual Review		Regular Position Ended	
Merit Increase		Grant Ended	
Service Increase		Layoff	
Job Re-evaluation			
OTHER EXPLANATIONS			

EFFECTIVE DATE

EMPLOYEE

SUPERVISOR

HUMAN RESOURCES

CHIEF FINANCIAL OFFICER

DEAN/PROGRAM DIRECTOR

PRESIDENT