

EMPLOYEE REPLACEMENT REQUEST

INSTRUCTIONS: This form is to be completed only by the local Pastor/Principal/Departmental Director for an **existing** position. To request the opening of a new position use the form "New Position (Budget) Request" available at newjerseyconference.org.

Mark one and fill out blank:

- School Name _____
 Church Name _____
 Conference Department _____

Information about the employee who is leaving (Please include copy of Church/ School Board Minutes)

First Name _____ Last Name _____
Employee ID # _____ Title _____
Reason for leaving: Retirement Voluntary Termination Transferred to: _____
Current Employee Last day of work: _____

Current position is

Please, mark ALL that apply either under part-time OR full-time column:

- | PART-TIME | FULL-TIME |
|---|---|
| <input type="checkbox"/> Regular OR <input type="checkbox"/> Temporary (up to 3 months) | <input type="checkbox"/> Regular OR <input type="checkbox"/> Temporary (up to 3 months) |
| <input type="checkbox"/> Locally funded OR <input type="checkbox"/> Conference funded | <input type="checkbox"/> Locally funded OR <input type="checkbox"/> Conference funded |
| <input type="checkbox"/> Combination of locally & conference | <input type="checkbox"/> Combination of locally & conference |

Person recommended (if known)

***We are recommending the following name to fill the vacancy:

First Name _____ Last Name _____

*(Ask prospective employee to fill out an employment application available from newjerseyconference.org)****

Church/School ONLY - Date the Board approved the above name: _____

Has the person named above worked for the New Jersey Conference in the past? Yes No

If you answered "yes" to the previous question, please, provide last date this person worked for the NJC:

Suggested Remuneration for the new employee

Mark one and fill the blank:

- Hourly** Pay Rate: \$ _____ *(No less than minimum state hourly wage)*
 Bi-weekly **Salary**: \$ _____ or Salary Scale _____ %

If charges should be split, percentage for each department/organization:

Department/organization 1: _____ %
Department/organization 2: _____ %
Department/organization 3: _____ %

Suggested effective date for change/s: _____ *[Allow two (2) to three (3) weeks for replacement employee to start work]*

*****In order for the prospective employee to start work, s/he has to complete an employment application, available from newjerseyconference.org, and submit it. Once the request is approved by the Administrative Committee/Executive Committee the prospective employee must come to the Conference and complete all required employment papers to be officially employed. Prospective employees CANNOT begin work before all required employment papers are completed and submitted.**

I have read the conditions of employment and I accept them.

Signature

Name of person filling out this form: _____ Date: _____

I hereby certify that I am the Church Pastor/School Principal/Departmental Director

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Organization Name _____

Position/Title _____

Employee Leaving _____

Person Recommended _____

Request date _____

FOR HUMAN RESOURCES USE ONLY

ADCOM/Personnel Committee/Education Executive meeting date: _____ Action No. _____

Approved

Approved with changes

Denied

Executive Committee meeting date: _____ Action No. _____

Approved

Approved with changes

Denied

Church Pastor/School Principal/Departmental Director notified on: _____ By e-mail/fax By phone