

PERMANENT CHANGE TO REPORTING LINES FORM

To be completed by the Faculty/Office/Department HR Administration Officer and faxed to HR on x9748.

Faculty/Office/Department HR Contact:

Faculty/Office: _____ Department: _____

Family Name: _____ Other Names: _____

Extension: _____ Signature: _____

Name of Human Resources Staffing Advisor (if known): _____

Reason for this Change to Reporting Lines (e.g. restructure, correction): _____

Date new Reporting Lines are to take effect: Immediately **OR** From: ___ / ___ / ___

Staff who require a change to their Reporting Line:

Staff Member: Name and Position Title	Staff Member: Position Number	New Manager: Name and Position Title	New Manager: Position Number
Example: Jack Roberts Senior Lecturer	21978	Mary Watson Head of Division	4398

Please fax this form to HR on **x9748**

HR Use Only:

HRIS entered: _____ (inits) ___ / ___ / ___ Checked: _____ (inits) ___ / ___ / ___