

Instructions for Transfer/Rehire Requests

Revised 09/2011

Refer to the following instructions when completing each field listed on the Transfer/Rehire Request form that is located on the next Worksheet tab. Please carefully review the "Notes" for further information regarding each field. Prior to submitting any request for an interagency transfer, the Losing Agency must ensure that the "Data Change/Employer Transfer Out" row has been entered into Job Data. Transfers involving 'Semi-Monthly' or 'Monthly' employees must be submitted directly to Core-CT Support for processing.

- Employee's Name:** Enter the **NAME** of the employee who is being transferred or rehired
- Employee ID:** Enter the **EMPLOYEE NUMBER** of the employee who is being transferred or rehired
- Effective Date:** Enter the **EFFECTIVE DATE** of the Rehire or Transfer action
NOTE: Transfer actions MUST be effective on the begin-date of a pay period
- Action Code:** Enter **TRANSFER** if the employee is being transferred *OR* Enter **REHIRE** if the employee is being rehired
- Action Reason:** Enter an appropriate **ACTION REASON** code for the Transfer or Rehire action
* Examples for Rehire reasons: "**Rehire**", "**Dual Employment**", "**Rehire from Layoff List**", etc.
* Examples for Transfer reasons: "**Demotion**", "**Trf WTP Failure,Diff PN,Same JCd**", "**Promotion to Vacancy**", etc.
- Position Number:** Enter the **POSITION NUMBER** that will be occupied by the employee
- Job Code:** Enter the **JOB CODE** to which the employee will be assigned
NOTE: The agency MUST provide the Job Code when the employee's Job title is different from the Position title, along with a reason for the discrepancy, e.g. "under-fill"
- Empl Class:** Enter the **EMPLOYEE CLASS** for this assignment
NOTE: DAS will change this field only when the transfer involves an employee with an Empl Class of 'Student Laborer'
* If the action is a lateral Transfer and the employee has completed a working test period in this job class, select the Employee Class of "**Permanent**"
* If the employee must serve a working test period, select "**Probation Period Classified**" for a Classified position *OR* select "**Probation Period Unclassified**" for an Unclassified position
* If the employee has not attained permanent status as a State employee, select "**Probation Initial Period Class**" for a Classified position *OR* select "**Probation Initial Period Uncls**" for an Unclassified position
- Standard Hours:** Enter the **STANDARD HOURS**, i.e. the number of hours per **WEEK** the employee will be scheduled to work (e.g., 17.5, 20, 35, 40)
NOTE: The Standard Hours MUST be provided for all requests involving part-time employees.
* Agencies should ensure that this field matches the approved number of Standard Hours for the Position
- FT/PT Indicator:** Enter whether the employee is to be **FULL-TIME** or **PART-TIME**
NOTE: The FT/PT Indicator automatically populates the FTE and MUST be in sync with the Compensation and Standard Hours field
- Certification No:** Enter the **CERTIFICATION NUMBER**, if applicable to the classified assignment
- Probation Date:** Enter the **PROBATION DATE**, i.e. the final day the employee is on the Working Test Period, if applicable
NOTE: Agencies must consult the employee's collective bargaining agreement to determine the length of the working test period, should one be required
- Appt. End Date:** Enter the **APPOINTMENT END DATE**, if applicable to the assignment
* If employee is being rehired or transferred in a status of Temporary, Durational, Rehired Retiree, this field is REQUIRED
- Salary Placement:** Enter the **SALARY ADMINISTRATION PLAN** (e.g. CL, AR, SH); Enter the **GRADE** (e.g., 10, 18, 25); Enter the **STEP** (e.g., 1, 2, 3)
- Comp Frequency:** Enter the **COMPENSATION RATE FREQUENCY** to which the employee will be assigned based on the Full-/Part-Time Indicator
NOTE: The Compensation Rate Frequency of "HCT" is required for requests involving part-time employees.
* If position is full-time, enter "BCT" for a Biweekly value; If the position is part-time, enter "HCT" for an Hourly value
- Comp Rate:** Enter the employee's **COMPENSATION RATE** for this assignment
* If employee is working full-time, enter the full-time Biweekly rate (e.g. \$1,227.02) based on the Salary Placement information
* If employee is working part-time, enter the part-time Hourly rate (e.g. \$15.34) based on the Salary Placement information
- Notepad:** Enter detailed description of transaction in **NOTEPAD**, including all salary calculations used, if applicable
- Gaining Agency:** Provide name, e-mail and phone number of the **CONTACT FOR THE GAINING AGENCY**
- Losing Agency:** Provide name, e-mail and phone number of the **CONTACT FOR THE LOSING AGENCY**
- Time Reporter Data:** Contact Payroll staff to obtain required information.

Please submit the completed form on the following page via e-mail to Pauline Mahoney at the DAS Central Audit Unit: pauline.mahoney@ct.gov

Thank you for your continued cooperation!

Transfer/Rehire Request Form

Revised 09/2011

This form is to be used for all Transfer and Rehire requests.
Please be sure to complete this entire form.

Job Data Page Values

Employee Name: _____
Employee Number: _____
Effective Date of Transfer/Rehire: _____
Action Code: _____
Action Reason Code: _____
Position Number: _____
Job Code: _____
Employee Class: _____
Standard Hours: _____
Full-/Part-Time Indicator: _____
Certification Number: _____
Probation Date: _____
Appointment End Date: _____
Salary Administration Plan: _____
Grade: _____
Step: _____
Comp Frequency: _____
Comp Rate: _____
Notepad: _____
Losing Agency Contact Email and Phone: _____
Gaining Agency Contact Email and Phone: _____

Time Reporter Data Page Values

Workgroup: _____
Taskgroup: _____
Shift: _____
Rot Avg Schedule?: _____
Eligible for Weekend Differential?: _____
Eligible for Shift Differential?: _____
Eligible for Overtime?: _____