## **Supervisor and/or Timesheet Approver Change Form**

Please fill out the fields below to make a change to an employee's supervisor and/or timesheet approver. Please read the form carefully and review the definitions, below, to ensure appropriate changes are made.

EMPLOYEE INFORMATION The employee(s) for which the supervisor and/or timesheet approver change request is made.			SUPERVISOR INFORMATION Responsible for the day to day performance, performance evaluations, directs work activities, has personnel responsibility for staff. The supervisor will be the default timesheet approver unless a Timesheet Approver is requested.			TIMESHEET APPROVER INFORMATION (If different than supervisor) If the supervisor will NOT be approving timesheets for the employees listed, please list a timesheet approver. If the supervisor will be approving timesheets, do NOT complete this section.		
G#	NAME	Posn/Suffix	G#	Name	Posn/Suffix	G#	NAME	Posn/Suffix

Effective Date of Change	Submitter Name	Submitter Email	HR Liaison Name	HR Liaison Signature (REQUIRED)
Pay Period Begin Date:				

HR Liaison's SIGNATURE IS REQUIRED. Forms will be returned if completed incorrectly.

E-mail approved and completed forms to <a href="https://example.com/HRDM@gmu.edu">HRDM@gmu.edu</a>. Forms must be received 5 days prior to the pay period begin date **Forms received after the pay**period begin date will be effective the following pay period.