



REQUEST FOR RECORD OF EMPLOYMENT CUPE 947 Non 12 Month Employees

DATE: _____

EMPLOYEE NAME: _____

EMPLOYEE #: _____

EXPECTED LAST DAY OF WORK: _____

- REGULAR
- or
- SP

*** PAYROLL & BENEFITS OFFICER USE ***	
REGULAR CUPE 947	CASUAL CUPE 947
First day worked since last ROE: _____	First day worked since last ROE: _____
Last day paid: _____	Last day paid: _____
Prior Year Statutory Pay: _____ Prior Year Vacation Payout: _____ Current Year Statutory Pay: _____	Reason for Issuing ROE: _____