

# Member Change of Status & Early Exit Form

This form should be completed and placed in the member file when a member's status changes. Any further status changes should be tracked on this same form in the additional fields.

\*This form does not need to be filled out for a successful completion and exit upon service end date.

Member Name	Grant Year

**Date Status Changed:**

*Effective date the change took place -last day hours were earned or date service resumed.*

NEW STATUS (Circle One)			
Suspended	Reinstated	Exited Early	Change in Service Term
<p>Reason Suspended:</p> <p><input type="checkbox"/> Compelling Personal Circumstance**</p> <p><input type="checkbox"/> Disciplinary Action</p> <p><input type="checkbox"/> Member is unable to serve any hours during full pay period</p> <p><input type="checkbox"/> Grievance Filed</p>	<p>Reason Reinstated:</p> <p><input type="checkbox"/> Member released to return to service</p> <p><input type="checkbox"/> Member is returning from disciplinary action</p> <p><input type="checkbox"/> Member is returning from period when unable to serve during full pay period</p> <p><input type="checkbox"/> Grievance is resolved with finding in members favors</p>	<p>Reason Exited:</p> <p><input type="checkbox"/> Compelling Personal Circumstance**</p> <p><input type="checkbox"/> Cause: Dismissal</p> <p><input type="checkbox"/> Cause: Resignation</p>	<p>Current Slot Type: MT QT RHT HT TQT FT</p> <p>NEW Slot Type: MT QT RHT HT TQT FT</p> <p><b>Reason for change:</b></p>

\*\*Must be documented

- Permission obtained from Nevada Volunteers for Change in Service Term
- Change of Status Communicated to Nevada Volunteers
- Documentation is in file (medical documentation is kept separate from member file)

Program Director Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date Status Changed:

**NEW STATUS (Circle One)**

Suspended	Reinstated	Exited Early	Change in Service Term
Reason Suspended: <input type="checkbox"/> Compelling Personal Circumstance** <input type="checkbox"/> Disciplinary Action <input type="checkbox"/> Member is unable to serve any hours during full pay period <input type="checkbox"/> Grievance Filed	Reason Reinstated: <input type="checkbox"/> Member released to return to service <input type="checkbox"/> Member is returning from disciplinary action <input type="checkbox"/> Member is returning from period when unable to serve during full pay period <input type="checkbox"/> Grievance is resolved with finding in members favors	Reason Exited: <input type="checkbox"/> Compelling Personal Circumstance** <input type="checkbox"/> Cause: Dismissal <input type="checkbox"/> Cause: Resignation	Current Slot Type: MT QT RHT HT TQT FT  NEW Slot Type: MT QT RHT HT TQT FT  <b>Reason for change:</b>

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- Change of Status Communicated to Nevada Volunteers
- Documentation is in file (medical documentation is kept separate from member file)

Program Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date Status Changed:

**NEW STATUS (Circle One)**

Suspended	Reinstated	Exited Early	Change in Service Term
Reason Suspended: <input type="checkbox"/> Compelling Personal Circumstance** <input type="checkbox"/> Disciplinary Action <input type="checkbox"/> Member is unable to serve any hours during full pay period <input type="checkbox"/> Grievance Filed	Reason Reinstated: <input type="checkbox"/> Member released to return to service <input type="checkbox"/> Member is returning from disciplinary action <input type="checkbox"/> Member is returning from period when unable to serve during full pay period <input type="checkbox"/> Grievance is resolved with finding in members favors	Reason Exited: <input type="checkbox"/> Compelling Personal Circumstance** <input type="checkbox"/> Cause: Dismissal <input type="checkbox"/> Cause: Resignation	Current Slot Type: MT QT RHT HT TQT FT  NEW Slot Type: MT QT RHT HT TQT FT  <b>Reason for change:</b>

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- Permission obtained from Nevada Volunteers for Change in Service Term
- Change of Status Communicated to Nevada Volunteers
- Documentation is in file (medical documentation is kept separate from member file)

Program Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_