

PAYROLL DOCUMENT

This form should be completed for special, one-time and hourly unclassified employee payments.

Employee Information

Name: _____ Banner ID: + _____
Last First MI

Department and Position Information

Department Name: _____ ORG Code: _____

Division: _____ Employment Dates: ____/____/____ -to- ____/____/____

Title: _____

Duties/Description: _____

Work Location:	Funding:	Payment Type:
<input type="checkbox"/> Oxford	Index: _____ \$ _____	Total Salary: \$ _____
<input type="checkbox"/> Hamilton	Index: _____ \$ _____	OR
<input type="checkbox"/> Middletown	Index: _____ \$ _____	Hourly Rate: \$ _____
<input type="checkbox"/> Voice of America	Index: _____ \$ _____	Hours Worked: _____
<input type="checkbox"/> Other _____	Index: _____ \$ _____	Total Hourly Salary: \$ _____

***A timesheet (back of form) must be completed for all hourly and part-time unclassified staff and any graduate assistants who received permission from the Graduate School to perform an additional assignment. Contact HR/AP prior to hiring an employee if you have questions regarding an employee's status.**

Requestor and Approval Information

Requested by: _____ Phone #: _____
Print Signature

Dept. Head/Chair: _____ Date: ____/____/____
(or Designee) Print Signature

Dean/Exec Dir: _____ Date: ____/____/____
(or Designee) Print Signature

Vice President: _____ Date: ____/____/____
(As Necessary) Print Signature

Comments: _____

HR/AP Office Use: Position #: _____ Suffix #: _____ Earn Code: _____ Eclass: _____ FTE: _____

Annual Salary: \$ _____ Account Code: _____ Reviewer/Builder Initials: _____

TIMESHEET DOCUMENT

This form must be completed for all hourly and part-time unclassified staff and any graduate assistants who received permission from the Graduate School to perform an additional assignment.

Payment Date Range: ___/___/___ -to- ___/___/___

	Start Time	End Time	Hours
Saturday			
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
		Total Hours	

Payment Date Range: ___/___/___ -to- ___/___/___

	Start Time	End Time	Hours
Saturday			
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
		Total Hours	

Payment Date Range: ___/___/___ -to- ___/___/___

	Start Time	End Time	Hours
Saturday			
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
		Total Hours	

Payment Date Range: ___/___/___ -to- ___/___/___

	Start Time	End Time	Hours
Saturday			
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
		Total Hours	