



REQUEST FOR ADDITIONAL PAY

(Please check one)											
Date of request:	Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Student <input type="checkbox"/>										
Name of Employee:											
Department:	Charge to*: *cannot be processed without this information <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Fund</th> <th style="width: 15%;">Org</th> <th style="width: 15%;">Acct</th> <th style="width: 15%;">Prog</th> <th style="width: 15%;">Activ (optional)</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Fund	Org	Acct	Prog	Activ (optional)					
Fund	Org	Acct	Prog	Activ (optional)							
Amount:	Date Service Performed:										
Reason:											
How are these duties outside the scope of employment of the employee's job?											
Supervisor/Requestor: (please print)	(please sign)										
Department Head: (please print)	(please sign)										

All additional pay requests or other payroll changes must be received in Human Resources by the last day of the month to be included in the paycheck issued the following month.

FOR HUMAN RESOURCES USE ONLY		
Amount:	Approved by Human Resources:	Date:
Banner ID #:		

original to Payroll
copy to employee file