

**EC/ESR Monthly Payroll Pay Order**

\_\_\_\_ New hire    \_\_\_\_ Change in status (Promotion/Transfer)    \_\_\_\_ Termination    \_\_\_\_ Other: \_\_\_\_\_

**Employee Personal Information**

Full Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Mailing/Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Country of Origin: \_\_\_\_\_

VISA Information: \_\_\_\_\_

**Position Information**

Position title: \_\_\_\_\_

Department/s name/s: \_\_\_\_\_

Drawer #: \_\_\_\_\_ Direct Supervisor: \_\_\_\_\_

Office Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Building & room #) (please note if a new extension is needed)

**Budgetary Information**

Budget Centers/Grants to be charged: \_\_\_\_\_ @ \_\_\_\_\_ %    \_\_\_\_\_ @ \_\_\_\_\_ %    \_\_\_\_\_ @ \_\_\_\_\_ %

Gross Salary: \$ \_\_\_\_\_ Approved Moving Expenses: \$ \_\_\_\_\_

Position is authorized at \_\_\_\_\_ months per year    Employee is scheduled to receive \_\_\_\_\_ paychecks annually

**Employee Category**

\_\_\_\_ Full time (FTE)    \_\_\_\_ Part time (PTE)    [*For one time salary payments please call Payroll x.1626*]

**Wage Account**

\_\_\_\_ Teaching Faculty (9001)    \_\_\_\_ Administrative Faculty (9003)  
    \_\_\_\_ Adjunct  
    \_\_\_\_ Tenure-Track  
    \_\_\_\_ Non-Tenure Track

**Benefits & Payroll Information**

Start Date: \_\_\_\_\_ Scheduled End Date: \_\_\_\_\_

Date that pay rate is effective: \_\_\_\_\_ Will faculty continue employment after end date ? Yes No

**Termination Information**

Termination Date: \_\_\_\_\_ Admin. Faculty: Contact Business Office in cases of unused vacation

**Business Office will complete as of date of hire:**

Full Legal Name as on SSN card: \_\_\_\_\_

Health Code (Full Time only): \_\_\_\_\_ Birthdate: \_\_\_\_\_

Full Time start date: \_\_\_\_\_

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**Notes:**

Authorized by: \_\_\_\_\_ Date: \_\_\_\_\_

Send Copies to: \_\_\_\_ Tomfohrde (194)    \_\_\_\_ Broncho (194)    \_\_\_\_ Mahler (66)    \_\_\_\_ Bragg (66)    \_\_\_\_ Lea (178)    \_\_\_\_ R. Smith (33)