



# Payroll Request Form

Job Change Reason \_\_\_\_\_

## Identification

Name \_\_\_\_\_ UO ID \_\_\_\_\_ Position \_\_\_\_\_ Suffix \_\_\_\_\_  
 Last First Middle  
 Department \_\_\_\_\_ Time Entry Org \_\_\_\_\_ E Class \_\_\_\_\_

## Job Detail

Effective Date \_\_\_\_\_ **Type:** Primary **Annual Basis:**  
 Job End Date \_\_\_\_\_ Secondary 9 month  
 Overload 12 month  
 Title \_\_\_\_\_ (30 Char. [Abbreviations](#))  
 Appt % (Actual FTE) \_\_\_\_\_ Hourly Rate \$ \_\_\_\_\_  
**Job Location:** ([Outside Oregon](#)) Monthly Salary \$ \_\_\_\_\_  
 City \_\_\_\_\_ Appt. Salary \$ \_\_\_\_\_  
 State \_\_\_\_\_ Country \_\_\_\_\_ Base Rate \$ \_\_\_\_\_

|                                                 |  |  |
|-------------------------------------------------|--|--|
| <b>Faculty</b><br>Regular<br>ProTem<br>Visiting |  |  |
|                                                 |  |  |
|                                                 |  |  |

## Labor Distribution (Please use a PAW for additional lines)

|              | Index | Fund | Org | Acct | Pgm | Activity | Monthly \$ | % |
|--------------|-------|------|-----|------|-----|----------|------------|---|
| 1            |       |      |     |      |     |          |            |   |
| 2            |       |      |     |      |     |          |            |   |
| 3            |       |      |     |      |     |          |            |   |
| 4            |       |      |     |      |     |          |            |   |
| 5            |       |      |     |      |     |          |            |   |
| <b>Total</b> |       |      |     |      |     |          |            |   |

## Remarks

## Employee's Supervisor

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 UO ID \_\_\_\_\_ Position \_\_\_\_\_ Suffix \_\_\_\_\_

## Authorization

| Prepared | Print | Sign | Phone | Date |
|----------|-------|------|-------|------|
|          |       |      |       |      |