

Special Paycheck Request

Date Received in Payroll: _____
 Processed by: _____
 Date Department Notified: _____

Note: The purpose of this form is to request a special out of cycle payment for an employee due to a missed or late personnel action changes or time approval. Please submit this completed form to mary.davis@untsystem and mari.walker@untsystem.edu once all signatures have been obtained. The department will be notified if the payment will be made prior to the next available payroll.

Please complete the following before submitting the request

1. Inform the employee(s) of payment delay 2. Verify all personnel action items have been entered and approved; and or 3. Verify all hours have been entered and approved.

DAL HSC SYS UNT

Department Name

Date of Request

Requestor's Name

Department Base ID#

Requestor's Email

Requestor's Phone #

Pay Period Start Date

Pay Period End Date

Employee ID#	Record#	Employee's Name	ePAR# (if applicable)	Time and Labor Group ID
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Reason for Request

Reason Payment Cannot Wait Until Next Available Payroll

Department Head Name _____	Signature _____	Date _____
----------------------------	-----------------	------------

Vice President or Dean's Name _____ Signature _____ Date _____

CFO/VP Finance Name _____ Signature _____ Date _____