# Payroll Action Form

## Employee Detail

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name: | Enter company name: | Hiring Date: | Enter date |

|  |  |
| --- | --- |
| Employee Name: | Enter Employee Name |

|  |  |  |  |
| --- | --- | --- | --- |
| Current Job Title: | Job Title | Position Number: | Position# |

|  |  |
| --- | --- |
| Position Applied For: | Enter position applied for |
| Required Skills: | Enter required skills |

## Job/Title Change

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| New Job Title: | [Job Title] |  | Position Number: | [Position#] |
| Effective Date: | [DATE] |  | Standard Hours: | [Hours] |
| Job Grade: | [Grade] |  | Department/Division: |  |
|  |  |  |  |  |

## Initiate or Change Pay

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Effective Date: [DATE] | | Pay Change/Action Reason | | |
|  |  | [Reason…] | | |
| Basic Pay: | [AMOUNT$] | Annual ☐ YES | Hourly ☐ YES | Other |
| Note: |  |  |  |  |
|  | | | | |
|  | | | | |
|  | | | | |

**Approval:**

|  |  |  |  |
| --- | --- | --- | --- |
| Department Head | *Signature* | Date: | *[DD/MM/YYYY]* |
| Dean/Director/VP/ or SVP | *Signature* | Date: | *[DD/MM/YYYY]* |
| Budget/RAF | *Signature* | Date: | *[DD/MM/YYYY]* |
| HRM Compensation | *Signature* | Date: | *[DD/MM/YYYY]* |

**HRM ONLY** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

INSTRUCTIONS: 1. Provide the employee’s NUID #, name, and position 2. Complete only the section(s) that applies to the action(s) you with to initiate. 3. Print the form, sign it and obtain the required approvals 4. Send it to the HRM Customer Service.

Form Originator Extension Print Name