

## Payroll Off-Cycle Payment Request

To be completed when an off-cycle payroll payment is being requested.

EMPLOYEE INFORMATION	
Employee Name:	PSU ID #:
Business Area:	
Payroll Type:	
Employment Type:  Faculty  Staff  Tech Service	Post Doc Grad Asst. Part-time
PAYMENT REQUEST INFORMATION	
Gross Amount of Off-Cycle Payment:	
Reason for Request: (Check the appropriate box AND provide detailed explanation)	
☐ Untimely submission of paperwork/timesheet/action by the department	☐ HR/Central Office Error
☐ Untimely submission of paperwork/timesheet by employee	☐ University Payroll Office Error
Detailed Explanation (required):	
Request Prepared By:	Date:
PSU email: PSU Telephone #:	
APPROVALS	
Dean or Department Head:	Date:
DOLL	
PSU email: PSU <u>Telephone #:</u>	
Submit completed form to the Payroll Office via WorkLion ticketing system.	
UNIVERSITY PAYROLL OFFICE USE ONLY	
Off-Cycle ID #: ACH Payment:	
Check #: Payment Date:	
Gross Amount: Net Amount:	
Payroll Office:	Date: