PennState

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: ☐ Monthly Payroll ☐ Bi-weekly Payroll

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: _____

PSU email:_____ PSU Telephone #:_____

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: _____

Questions about this form? Contact University Payroll at payroll@psu.edu