Virginia Polytechnic Institute and State University

MANUAL PAYMENT REQUEST FORM

SALARY, SUMMER SCHOOL OR STIPEND

Requests must be received by close of business on the 2nd business day after the last regularly scheduled paydate.

PAYROLL ID (Circle one): SA (Staff, FA, P14, GA) SS, ST

EMPLOYEE LAST NAME: ____________________________

FULL VT ID NUMBER: ________________________________

PAY PERIOD(S) OMITTED: ________________________________

FUNDING: ____________________________ DEPARTMENT NUMBER: ____________________________

POSITION & SUFFIX: ____________________________ Please check this box verifying that the position has been entered and approved in Banner prior to submitting request.

EFFECTIVE DATE OF POSITION: ____________________________

SEMI MONTHLY PAY RATE: $ ____________________________

REASON FOR MISSED PAYMENT

____________________________________________________________________________________

____________________________________________________________________________________

ACTION TAKEN TO PREVENT FUTURE MISSED PAYMENT: ____________________________

____________________________________________________________________________________

Manual payments will be sent via direct deposit to the employee’s account listed as “Other VT Payments”. Please have the employee verify their account in Hokie Spa.

Payments are processed for transmittal to the employee’s bank on the 5th business day following the last regular payday. Actual posting date is dependent upon the employee’s financial institution.

If this form is not received with complete information, it will be returned to the requestor for correction prior to processing.

I understand the above statement.

____________________________________________________________________________________

EMPLOYEE SIGNATURE ____________________________ DATE ____________________________

____________________________________________________________________________________

DEPARTMENT HEAD SIGNATURE ____________________________ DATE ____________________________

If employee or department head are not available for signature, please have them provide an email approval in lieu of signature, which should then be attached to this form and then submitted to the Payroll Dropbox.