SOUTHERN METHODIST UNIVERSITY

PAYROLL AUTHORIZATION FORM

SMU EMPLOYEE ID NUMBER _____

POSITION NO. _____

SOCIAL SECURITY NUMBER _____

EMPLOYEE NAME _____

JOB TITLE/RANK _____

PAY GRADE _____ JOB CODE _____ ROUTING CODE _____

HOME BASE ORG _____
DEPT. ID/ORGANIZATION CODE

NAME OF HOME BASE _____

EMPLOYEE TYPE ☐ FACULTY

POSITION STATUS ☐ FULL-TIME PERMANENT

☐ PART-TIME PERMANENT

CONTRACT MONTHS

PAY SCHEDULE

EMPLOYEE TYPE ☐ EXEMPT STAFF ☐ NON-EXEMPT STAFF

POSITION STATUS ☐ FULL-TIME PERMANENT
35 HRS. OR MORE A WEEK

☐ FULL-TIME PARTIAL YEAR — NUMBER OF MONTHS WORKED _____
35 HRS. OR MORE A WEEK, LESS THAT 12 MONTHS

☐ PART-TIME PERMANENT
20-34 HRS. A WEEK

☐ PART-TIME PARTIAL YEAR — NUMBER OF MONTHS WORKED _____
20-34 HRS. A WEEK, LESS THAT 12 MONTHS

CHECK BASE HOURS NORMALLY WORKED IN DEPARTMENT PER PAY PERIOD

☐ 75.00 BIWEEKLY ☐ 162.50 MONTHLY

☐ 80.00 BIWEEKLY ☐ 173.33 MONTHLY

SCHEDULED HOURS TO WORK PER PAY PERIOD

PROPOSED ACTION
(CHECK)

☐ NEW HIRE ☐ PAY RATE CHANGE
☐ REHIRE ☐ EARNINGS DISTRIBUTION CHANGE
☐ TRANSFER ☐ JOB RECLASSIFICATION
☐ PROMOTION ☐ STATUS CHANGE
☐ REINSTATEMENT

COMMENTS _____

PRESENT ANNUAL BASE SALARY _____ MONTHLY/ HOURLY RATE _____

PROPOSED ANNUAL BASE SALARY _____ MONTHLY/ HOURLY RATE _____

EFFECTIVE DATE _____ END DATE _____

EARNINGS DISTRIBUTION

FUND	ORGANIZATION	PROJECT	ACCOUNT	PERCENT OF TIME	EFFECTIVE DATE	END DATE

APPROVALS

DEPARTMENT CHAIR/DIRECTOR _____ DATE _____

VICE-PRESIDENT _____ DATE _____

DEAN _____ DATE _____

PRINCIPAL INVESTIGATOR _____ DATE _____

FINANCIAL OFFICER _____ DATE _____

HUMAN RESOURCES _____ DATE _____