## PAYROLL CHANGE FORM

This form is used to correct earnings or pay codes for hourly employees for a PRIOR pay period. Email completed and signed form to Payroll@rit.edu. Adjustments will be processed with the next payroll.

| Employee Name: | Employee Number/Badge Number/UID: |  |  |
| :--- | :--- | :--- | :--- |
| Account Number: $\square$ |  |  |  |
| Entity | Department | Object | FEC |
|  |  |  |  |
| Project | Program |  |  |

## **USE FOR HOURLY EMPLOYEE ADJUSTMENTS:


**USE FOR ADJUSTMENTS TO GRAD ASS’T SALARIES, STIPENDS OR RATE INCREASES:

| Employee |
| :--- |
| Signature: |

## Date:

Your signature certifies that this information is accurate and complete.

| Supervisor Print Name: | Supervisor <br> Signature: | Date: | *Extension: |
| :--- | :--- | :--- | :--- |

