## Prairie View A&M University Payroll Adjustment Request Form

This form must be complete and submitted to the Payroll Department on or before the designated payroll deadline/due date as disclosed on the Payroll calendar located here: <a href="https://www.pvamu.edu/hr/payroll-services/pay-periods/">https://www.pvamu.edu/hr/payroll-services/pay-periods/</a>

Employee Name: En				oloyee UIN:			
De	epartment Name	:		_			
Ple	ease select the ir	ntent for this subm	ission:				
☐ Add Monthly employee's missed payroll to an upcoming biweekly payroll							
	☐ Adjust current processing payroll						
Required Data							
	Payroll Period Start date	Payroll Period End date	Worktag	Amount	Justifica	Justification/Explanation	
Αp	provals/Signatu	res:					
Requestor:				Date:			
Department Head/Manager:				Date:	Date:		
	,	<u> </u>			<del></del>		
						Payroll Department use only: Entered by:	

Please print, date, sign and return this form to Payroll Department via email payroll@pvamu.edu