

**AUSTIN PEAY STATE UNIVERSITY
GENERAL CAMPUS AND FEDERAL WORK STUDY
STUDENT EMPLOYMENT
PAY RATE CHANGE FORM**

PPAIDEN (Demographic Information)

Student Employee Last Name: _____ First Name: _____ Middle: _____
(exactly as shown on Social Security Card)

Student Banner ID # : A _____

Please make the following pay rate change to this student's job assignment (provide reason):

Pay Rate Change _____

Supervisor Signature: _____ Date: ____ - ____ - ____

Department Name: _____

Departmental Contact Name: _____ E-Mail Address: _____

NBAJOBS (Assignment Information)

Position Number: _____ (Use Chart A and/or Chart C)

Effective Date of Change: ____ - ____ - ____ (Retroactive changes are not allowed - also must be start of pay period)

Job Detail

Change Reason: OTHR

New Hourly Rate: _____ (Use Student Assistant Pay Level Chart)

Payroll Default

Timesheet Organization: T _____ (5 Digit Code: Use Chart B)

Default Shift: F or N (HR Use Only)

(Data Entry Use Only: F = 5 or less hours; N = 6 or more hours)

Job Labor Distribution: FOAP

Fund: _____ Orgn: _____ Acct: _____ Program: _____
(Use Finance Chart of Accounts)