



The University of Utah

Neurobiology & Anatomy

## PAYROLL CHANGE REQUEST FORM

(Please give to Liz or Marilyn in the Main Office)

Employee Name: \_\_\_\_\_

UNID: \_\_\_\_\_

Current:

- Project or Activity: \_\_\_\_\_
- Percentage of Effort: \_\_\_\_\_

New:

- Project or Activity: \_\_\_\_\_
- Percentage of Effort: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Old Salary Amount: \_\_\_\_\_ New Salary Amount: \_\_\_\_\_

Is employee coming off a scholarship / fellowship?      Yes      No

Is employee's insurance paid by a campus order billed by HR?      Yes      No

Is a change in status needed for any of the following?

- Department Directory
- Department Email Lists
- Department Web Site

Faculty Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Notes:

Date Complete: \_\_\_\_\_ Initial: \_\_\_\_\_