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| The UNIVERSITY of OKLAHOMA | | | | | Reset Values | | |
|---|----------------------------|-------------------------------|-------------|--------------------------------|----------------------------------|--|--|
| W The UNIVERSITY of OKLAHOMA Health Sciences Center | ſ | 1 | | | OU Pay Form | | |
| | L | Is this payment? | In Addit | tion to Online Data | Override Online Data | | |
| Last Name: 2 | First Name: | 3 | | Employee ID: | 4 | | |
| Position ID: 5 | Hourly Rate: | 6 | | Pay Group: | 7 - | | |
| Work Begin Dt: 8 | Work End Dt: 9 | | | Pay Period End Date: 10 | | | |
| Dept ID: 11 | Dept Contact: | 12 | | Contact Phone: 13 | | | |
| Additional Payment Types (code descriptions) | | Amount | HR | Combo Code | Grant* (Requires Initials Below) | | |
| 14 | | | | | | | |
| 14 | | 16 | | 17 | 18 | | |
| | | | | | | | |
| Other (Explain Below): 15 | | | | | | | |
| ***Dear (VD Simuture Dearvierd | | | | | | | |
| ***Dean/VP Signature Required | | Signature of I | Dean/Vice | President | Date | | |
| Base Earning Payment Types | Hours | Amount | | HR Combo Code | Grant* (Requires Initials Below) | | |
| <u>19</u> | 20 | 16 | | 47 | 18 | | |
| | | 16 | | 17 | 10 | | |
| Other (Explain Below):15 | | | | | | | |
| NOTE: All hourly employee | payments require addi | tional information (box below | w) and su | pporting documentation. | | | |
| Explanation/Additional Information: | | 21 | | | | | |
| | | 21 | | | | | |
| | the formation of the | | | | | | |
| I hereby certify that I process the payroll for my department and th herein is true and correct. Where applicable, I have reviewed a tim employee's supervisor. | | Sigr | nature of [| 22 Department Payroll Coord | linator | | |
| I hereby certify, to the best of my knowledge, this employee or ten | nporary worker is entitled | | | 23 | | | |
| to pay as indicated and all leave taken since the last payroll (if appl this report. Furthermore, I certify that this supplemental pay (if ap | icable) is included with | | Signat | ure of Department Head | | | |
| with HSC Administration Policy, Special Payment Request, Section | <u>1 312</u> . | | | | | | |
| *Grants & Contracts Accounting Initials: | 24 | **HR Compensation | Initial | 25 | Updated: 08/21/2024 | | |

1 | P a g e



- 1. Is this payment in addition to Online Data or meant to override Online Data?
 - a. In Addition to Online Data- If you need to add an amount and/or hours to an employee's check but don't need to change anything else. For example, an employee terminated before an Add Pay ePAF was executed.
 - b. Override Online Data- Hours or amounts that loaded for employee is incorrect and needs to be updated. For example, an Add Pay ePAF was executed with an incorrect amount or an employee's timesheet error was discovered after timesheets were locked.
- 2. Last Name: Job Data screen
- 3. First Name: Job Data screen
- 4. Employee ID: Job Data screen
- 5. Position ID: Job Data screen
- 6. Hourly Rate: Job Data screen
- 7. Pay Group: Job Data screen

| avorites - Main Menu - > Workfo | arce Administration $	extsf{-}$ > Job Information | i ≠ ⇒ Job Data | | | | |
|------------------------------------|--|----------------------------|---------------------------|------------|----------|---|
| | | | | | j , | |
| Work Location | on Job Labor Payroll | Salary Plan Compensat | ion | | | |
| 3 2 <u>ohn Smith</u> mployee | | Empl ID 4 Empl Record 0 | | | | |
| Vork Location Details ⑦ | | | C | λ | 1 of 1 🗸 | • |
| *Effective Date | p6/26/2022 | | | Go To R | ow | + |
| Effective Sequence | 0 | *Action | | | | |
| HR Status | | Reason | | | | |
| Payroll Status | | *Job Indicator | Primary Job | | ~ | |
| | | Primary Campus | Oklahoma City | | | |
| Empl Group | Salaried Staff | Reemployability | Reemployable in this Dept | | | |
| Position Number | 20006195 5 Q | Pharmacist | | - Current | | |
| Position Entry Date | Override Position Da 01/18/2022 Position Management Reco | | | | | |
| Regulatory Region | USA | United States | | | | |
| Company | HSC | University of Oklahoma HSC | | | | |
| Business Unit | | OU Health Sciences Center | | | | |
| Department | _ | Pharmaceutical Care | | | | |
| Department Entry Date Location | 01/18/2022 OUPB | OUP Bldg | | | | |
| Establishment ID | HSC Q | University of Oklahoma HSC | Date Created | 06/09/2022 | | |



| Work Location | Job Informatio | n Job <u>L</u> abor | Payroll S | alary Plan | <u>C</u> ompensation | | | |
|---|--|-----------------------|-----------------------------------|------------------------|-----------------------------------|--------------------------|--------------|--------------|
| John Smith Employee | | | | Empl ID I Record 0 | | | | |
| Payroll Information | on ⑦ | | | | | | Q 4 4 | 1 of 1 🗸 🕨 |
| Effec | | 06/26/2022 0 | | | Action Reason Job Indicator | ^P rimary Job | | Go To Row |
| F Payroll for North | | Payroll for North Ame | rica | | | | | Current |
| | Pay Group Employee Type | s 0 | 7 Exempt Employees Salaried | i | Holiday Sc | HOL | Q Holiday | / |
| Тах | Location Code GL Pay Type | OUHSC Q | OUHSC | | FICA Exempt F | Status Subject NonExm | pt 🗸 | • |
| Cor | mbination Code | | | | | Edit ChartF | leids | |
| Work Location | Job Information | Job Labor Pa | yroll <u>S</u> alary Pla Emp | Empl ID ol Record 0 | ation | | | |
| Compensation Det | tails ⑦ | | | | | | Q | 1 of 1 🗸 🕨 🕨 |
| Eff | Effective Date ective Sequence HR Status Payroll Status | 06/26/2022 0 | | | Action Reason Job Indicator | Primary Job | | Go To Row |
| Ca ▶ Comparative Ir ▼ Pay Rates ⑦ | ompensation Rate | 4,30 | 7.69× | | | *Frequency | B Q Biweekly | Guirein |
| Hourly 6 Biweekly | 3 | | USD Mon USD Ann | nthly Iual | | USD USD | | |
| Default Pa | ay Components | | | | | | | |



- 8. Work Begin Dt: Beginning date of work employee is being paid for
- 9. Work End Dt: Ending date of work employee is being paid for
- 10. Pay Period End Date: Pay Period End Date of current payroll or payroll that these earnings will be paid on
- 11. Dept ID: Job Data screen
- 12. Dept Contact: Person that should be contacted for any questions or corrections (usually person submitting the form)
- 13. Contact Phone: Phone number or university extension of Department Contact
- 14. Additional Payment Types
 - a. This section of form should only be used in place of Add Pay ePAF if the employee is terminated or in a Pay Group that is no longer eligible for the earning code needed. Missing the deadlines for the Add Pay entry or delayed approvals should be paid on the next payroll, not entered on a form request. Deadlines can be found on the End User Calendar.
 - b. Code Descriptions- Click to see Add Pay Earning Codes on the website. This document also includes tabs that show the required Dean, Provost and HR Approval for each earning code. These signatures must be obtained on the paper form before submitting.
 - c. Choose the code that you would normally enter via an Add Pay ePAF in PeopleSoft
 - d. If Additional Payment type is for an hourly employee and it is a non-discretionary payment (as determined by HR Compensation), attach the completed Add Pay Overtime Calculation worksheet
- 15. Other (Explain Below): If section 14 or section 19 doesn't have correct earning code for your payment, type it in this field. Must use Add Pay Earnings Code spreadsheet to verify that the needed signatures are obtained.
- 16. Amount: Gross amount to be paid
 - a. In the Base Earnings Payment Types, the Hours should be multiplied by the Hourly Rate to get the Amount
 - b. Amounts in this field can be entered as negatives, will turn red
- 17. HR Combo Code:
 - a. Only needed if overriding the information on the employee's job record, the system will automatically use whatever funding allocation is setup on the employee's job record, so this field is only necessary if different
 - b. Must split hours and/or amounts by HR Combo Code even if the payment types are the same
 - c. Enter all leading zeros
- 18. Grant*:
 - a. Only needed if overriding the information on the employee's job record, the system will automatically use whatever grant allocation is setup on the employee's job record, so this field is only necessary if different
 - b. Must split hours and/or amounts by Grant even if the payment types are the same
 - c. Any grant listed in this field requires an initial from a Grants and Contracts contact



- 19. Base Earning Payment Types:
 - a. These payment types would follow the codes that can be found in TAL
 - b. Any hours using code REG, 020 or 055 require a paper timesheet as part of the supporting documentation for all hourly employees
- 20. Any items listed in this section must be reflected in TAL. An adjustment should be created in TAL and a screenshot of the approved adjustment should be included with the supporting documentation or a TAL Adjustment Form should be completed if period is no longer available in History

(Note: The only exception is if an employee has no timesheet available for the period due to late ePAF execution) Hours: Number of hours to be paid

- a. Required for majority of codes in the Base Earning Payment Types section
- b. Hours in this field can be entered as negatives, will turn red
- 21. Explanation/Additional Information: A clear and concise explanation of why the OU Pay Form is being used instead of using the system. Should also include the explanation of any codes listed in the "Other (Explain Below):" section.
- 22. Signature of Department Payroll Coordinator: Signature of Primary Department Payroll Coordinator or Delegate
- 23. Signature of Department Head: Signature of the Department Head or a designated delegate
- 24. *Grants & Contracts Accounting Initials: Required for any codes using a Grant number
- 25. **HR Compensation/Provost Initials: Required for all Payment Types that need HR Compensation Approval or Provost Approval
 - a. Will have two asterisks beside earning code

| Additional Payment Types | (code descriptions) |
|---------------------------|---------------------|
| 163 Incentive Earns - OUP | ' Tulsa** 🔄 |

- b. Use the Add Pay Earnings Code spreadsheet from the website to verify which Payment Types require HR Approval or Provost Approval
- 26. ***Dean/VP Signature: Required for all Payment Types that need Dean Approval
 - a. Will have three asterisks beside earning code

- b. Use the Add Pay Earnings Code spreadsheet from the website to verify which Payment Types require Dean Approval
- c. Earning codes that have both two asterisks and three asterisks require both HR Comp/Provost initials and Dean/VP Signature

TIN Temporary Instructor**/***



Resources

- Add Pay Earnings Codes (https://financialservices.ouhsc.edu/Forms/add-pay-earning-codes)
- Add Pay Overtime Calculations (https://financialservices.ouhsc.edu/Forms/add-pay-overtime-calculations)
- Paper Timesheet (https://financialservices.ouhsc.edu/Forms/timesheet-for-hourly-employees-paper-form)
- Create a New Combo Code (<u>https://financialservices.ouhsc.edu/Training#594464329-payroll-training-manuals</u>)
- End User Payroll Calendar (https://financialservices.ouhsc.edu/Departments/Payroll-Services/Payroll-Coordinators/New-Payroll-Coordinators)