## Manual Check Request Dynamic Form – Non-Exempt Employee

When a department needs to pay an employee outside of an on-cycle payroll, a Manual Check Request is required. This guide instructs on the form submission process for non-exempt (hourly) employees.

## 1. Within Raiderlink/WebRaider, select Payroll & Tax. Under Payroll Forms, select Manual Check Request - Dynamic Form.

	Employee Resources	Payroll Forms
News/Events	My Personal Information	<ul> <li>Manual Leave Adjustment Application (Now Live)</li> <li>MLA Instructional Guides &amp; Videos</li> </ul>
Available Budget 〈	<ul><li>View Addresses and Phones</li><li>Update Addresses and Phone</li></ul>	<ul> <li>Lump Sum Vacation Certification Form</li> <li>Web Time Entry/Web Leave Report Approver Update Form</li> </ul>
A&F Work Tools	View E-mail Addresses	<ul> <li>Instructions</li> <li>Web Time Entry/Web Leave Report Proxy Update</li> </ul>
Payroll & Tax	My Employment Information	Form     O Instructions     Manual Check Request - Dynamic Form

• Non-Exempt Employee Instructions

• Exempt Employee Instructions

## 2. Click "Complete This Form".



3. Form preparer information will auto populate.

	s TECH UNIVERSITY Toll & Tax Serv	ices <sup>-</sup> MAN	UAL CHECK REQU	EST (UDEV)
FormID: 06f65513-b	5e5-4f57			
Request is due Friday 5	pm and will pay the following Friday.			
If the requested payr	nent covers more than one payroll, p	please submit a form for eac	h payroll.	
Will the employee sig	n this form? * Please Select - • Payroll * Plea Type:	Ise Select V Pay Period:	Please Select V	
Preparer Tech ID:	R00000009	Preparer Name:	Pepper Potts	
Department Org #:	C PERSONAL	Department Name:	Technology & R&D	Chart of Account: T
Preparer Email:	pepper.p@ttu.edu	Contact Phone:	(806)	
		1		

## Preparing Form

While the form is being prepared, some form sections and fields will appear or disappear after selections are made. This occurs by design to streamline the form for user input and to decrease possible entry errors.

4. If the employee will sign the form upon its completion, select "Yes". If the employee will not sign the form, select "No". The employee is required to sign the form unless they are not available to sign it (on leave, ill, terminated, etc.).

Will the employee sig	n this form? * Please Se	lect · 🗸		
Date 03/28/20 Prepared:	124 Payroll * Type:	Please Select  Pay * Period:	Please Select 🗸	
Preparer Tech ID: Department Org #: Preparer Email:	R0000009	Preparer Name: Department Name: Contact Phone:	Pepper Potts Technology & R&D (806)	Chart of Account: T

5. Select "Semi-Monthly" for Payroll Type. Then select the pay period the employee needs to be paid on. The seven most recent pay periods will be available for selection. If an earlier pay period is needed, email webmaster.payroll@ttu.edu.

Will the employee sig	n this form? * Yes	•				
Date 03/28/20 Prepared:	24 Payroll Ser Type:	ni-Monthly Pay Period:	* Please Select Please Select 03/01/2024-03/15/2024	2		
			02/16/2024-02/29/2024			
Preparer Tech ID:	R0000009	Preparer Name:	02/01/2024-02/15/2024			
Department Org #:	Cabbbb	Department Name:	01/16/2024-01/31/2024		Chart of Account:	Т
Prenarer Email:	nannar n Ottu adu	Contact Phone:	01/01/2024-01/15/2024			
Freparer Ernan.	pepper.p@uu.eau	Contact Phone.	12/16/2023-12/31/2023			
			12/01/2023-12/15/2023			

6. Next to the Employee Tech ID field, enter the R# or name of the employee. Partial data entered will display results that match with the data that was entered. It may take up to 45 seconds for the Employee Tech ID field to become available for searching.

Preparer Tech ID: Department Org #: Preparer Email:	R0000009	Preparer Name: Department Name: Contact Phone:	Pepper Potts Technology & R&D (806)	Chart of Account:		
Employee Tech ID: Employee Email:	Employee Tech ID:       * Enter Tech ID or Name        Employee Name:         Employee Email:       Once the Employee Tech ID list is ready, this message will disappear					
Populating Employe	e Tech ID list. Please allow 30-45 second	s. Once populated beg	jin typing Tech ID or name.			

7. Once the employee is found, select them by clicking on their name. Then select the position number the employee needs to be paid for.

Preparer Tech ID: Department Org #: Preparer Email:	R0000009	Preparer Name: Department Name: Contact Phone:	Pepper Potts Technology & R&D (806)	Chart of Account:	Т
Employee Tech ID: Employee Email:	* Enter Tech ID or Name 🔺 Happy H	Employ	yee Name:		
	R0000001-Happy Harai R00000007-Happy Hogan				
Preparer Tech ID: Department Org #: Preparer Email:	R0000009	Preparer Name: Department Name: Contact Phone:	Pepper Potts Technology & R&D (806)	Chart of Account:	Т

8. Select the employee's supervisor from the Supervisor drop down. If the employee's supervisor is not listed, selecting "other" will allow you to enter the employee's current supervisor manually.

Employee Tech ID:	R0000007- Happy Hogan 👻 Employee Name: Happy Hogan
Employee Email:	happy.h@ttu.edu Employee Position T99999-00 Chief of Security Position Org:
Supervisor	* Enter Tech ID or Name V Supervisor Name:
Supervisor Em	il: R0000005 - Tony Stark
	R00000004 - James Rhodes Selecting "other" will allow you to enter the employee's current supervisor
Supervisor Supervisor Em	<ul> <li>* Enter Tech ID or Name Supervisor Name:</li> <li>- Enter Tech ID or Name R00000005 - Tony Stark</li> <li>R00000004 - James Rhodes Other</li> <li>Selecting "other" will allow you to enter the employee's current supervisor.</li> </ul>

Fund	Organization	Account	Program
			*
	The FOAP(s) employee's auto-populat	that fund the bosition will e here.	
Please check a general reason A	ND input an explanation as to wh	y there is a need to issue a man	ual check.
* O Pay increase O Delayed ePAF O Failed to submit timesheet	<b>←</b> 1	2	
Owed additional compensation     Wrong shift code		+	
			a

9. Select the reason a manual check request is being submitted. Then type an explanation that elaborates on the reason.

10. If "Pay Increase" is chosen as the general reason, an explanation is required.



11. If "Delayed ePAF", "Failed to Submit Timesheet", "Owed Additional Compensation", or "Wrong Shift Code" is selected as the general reason, an explanation and the hours that need to be paid are required. Hours need to be itemized within the grid below. Hours must be rounded in quarter-hour increments.

If the appropriate earnings code is not available to select in the Earnings Code drop-down, select RGH for the earnings code, and make a note of the intended earnings code in the explanation. Earnings codes that are not available for selection are "Sick Leave Donation Not Taxable SDN", "Sick Leave Donation Taxable SLD", "Family Leave Pool Not Taxable FLN" and "Family Leave Pool Taxable FLT".

Please check a general r	eas	on AND input an explanation	n as to why there is	s a need to issue	a manual check.		
* O Pay increase							
O Delayed ePAF		7					
Failed to submit timeshe	eet						
Owed additional compe	nsati	on					
Wrong shift code							
Type of hours to pay (RGH, SCK, HOL, etc.	)	Shift will always be 1, except for departments using shift differentials.	i		Total hours for code for each	<sup>.</sup> each earnings week.	
Breakdown of Attendance (pe Earnings Code	er wo	r <u>k week): <b>Worł week runs from</b></u> Shift	Sunday - Saturday	Week 1 Ending Date	Week 2 Ending Date	Week 3 Ending Date	Week 4 Ending
	_			03/16/2024	03/23/2024	03/30/2024	03/31/2024
Please Select 🔹		Please Select 🗸	0				
Please Select 🔹		Please Select 🗸	0				
Please Select 🔹		Please Select 🗸	0				
Please Select 🔹		Please Select V	0				
Please Select 🔹		Please Select 🗸	0				
Please Select 🔹		Please Select 🗸	0				
		Iotal Hours	0				

Please check a general reas	on AND input an explanation as to w	why there is a need t	o issue a manual ch	ieck.			
* O Pay increase		-					
O Delayed ePAF							
Failed to submit timesheet							
Owed additional compensat	ion						
<ul> <li>virong snitt code</li> </ul>		and the second second second second	alaani oo laalaali of ilaa				
Employee was out sick when tin	nesheets were due, and supervisor was un	available to fill out time	sheet on behalf of the e	employee.			
					/		
Breakdown of Attendance (per wo	ork week): Work week runs from Sunday	- Saturday					
Earnings Code	Shift	Total Hours per Earnings Code	Week 1 Ending Date	Week 2 Ending Date	Week 3 Ending Date		
			03/02/2024	03/09/2024	03/15/2024		
RGH-Hours Worked 🔹	1 ~	72	8.00	40.00	24.00		
VAC-Vacation Pay 🔹	1 ~	8			8.00		
SCK-Sick Leave							
Please Select *	Please Select						
Please Select *	Please Select V 0						
Please Select *	Please Select 🗸	0					
	Total Hours	88					
**WARNING** Please review the	earnings codes and ensure there are n	o duplicates unless t	he shift code is differe	ent.			

12. When you have finished filling out the form, click "Next".

arnings Code	Shift		Total Hours per Earnings Code	Week 1 Ending Date	Week 2 Ending Date	Week 3 Ending Date
				03/02/2024	03/09/2024	03/15/2024
RGH-Hours Worked 🛛 👻	1	~	72	8.00	40.00	24.00
VAC-Vacation Pay -	1	~	8			8.00
SCK-Sick Leave 🛛 👻	1	~	8			8.00
Please Select 👻	Please Sel	ect 💙	0			
Please Select 🔹 👻	Please Sel	ect 💙	0			
	Please Sel	ect 💙	0			
Please Select 🔹				••		
Please Select *	Total Hours the earnings codes and	d ensure there are	88 e no duplicates unless t	he shift code is differ	ent.	
Please Select *	Total Hours the earnings codes and	d ensure there are	88 e no duplicates unless t	he shift code is differ	ent.	
For     Payroll     Jse Only	Total Hours the earnings codes and Payroll ID	d ensure there are	B8 e no duplicates unless t Deductions Set Up	Paid On Sam Payroll	e Only Paid Longevity	
ARNING** Please review NARNING** Please review For Payroll Jse Only	Payroll ID SM	d ensure there are Payroll #	B8 eno duplicates unless t Deductions Set Up	Paid On Sam Payroll	e Only Paid Longevity	
A Please Select * WARNING** Please review For Payroll Jse Only ongevity/ lazardous	Payroll ID Eligible	Payroll #	88       e no duplicates unless t       Deductions Set Up       Y       2 Yr. Service Credit Fr	Paid On Sam Paid On Sam Payroll Y Ulfilled Wrong Payro	e Only Paid Longevity Il Cycle Worked On	The 1 <sup>st</sup> Of The Mo
Please Select * WARNING** Please review For Payroll Jse Only ongevity/ lazardous	Payroll ID Eligible	Payroll #	88       e no duplicates unless t       Deductions Set Up       Y       2 Yr. Service Credit Fr       N	Paid On Sam Payroll Y	e Only Paid Longevity	The 1 <sup>st</sup> Of The Mo

13. Sign the form electronically. After the signature is completed, you will receive an email confirmation with a PDF copy of the manual check request.

Electronic Signa	ature	
Please read the <u>Disclosure / Con</u>	<u>sent</u> before you sign your form electr	onically.
Typing your name exactly as it a are certifying that you have read disclosures or other communica	opears below signifies you are comple and understand the Disclosure/Cons tions related to this transaction electe	eting this form using an electronic signature. By signing electronically, you sent and agree to electronically sign. You also agree to receive required ronically.
To continue with the electronic s and submit your electronic signa	ignature process, please enter your r iture.	name and click the "Sign Electronically" button to save your information
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Please be informed:

- The employee's supervisor and the employee (if employee signature was elected in step 4) will receive an email requesting their signature for approval of the manual check request. The manual check request will only be submitted for payment once all approvals have occurred.
- The employee's Organization Manager will also receive an email advising that a manual check request form was submitted for the employee.
- The supervisor and employee may return a form to the preparer if corrections are needed.
- After all approvals are complete, the form preparer and employee will receive an email advising them on the estimated pay date.
- Questions regarding the Manual Check Request form and payment, should be directed to <u>webmaster.payroll@ttu.edu.</u>