



Pay Frequency Change Form

Date: _____

Name: _____

University ID #: _____

- Please change my pay schedule from 10 months (August 31 – May 31) to 12 months (July 31 to June 30) beginning with the 20 ____ - 20 ____ academic year.

Requests for changes must be received in Business Operations – Payroll PRIOR to MAY 15 of the current academic year. Your first paycheck for the academic year will be on July 31.

- Please change my pay schedule from 12 months (July 31 – June 30) to 10 months (August 31 - May 31) effective July 1, 20 ____.

Signed: _____

SCAN AND RETURN FORM TO: payroll@uni.edu (preferred)

OR mail to Business Operations – Payroll, mail code 0008

For questions call 273-7049 or e-mail payroll@uni.edu

Updated: 7/23/2021 jt