



# SWEET BRIAR COLLEGE Payroll Data Record (PDR)

NAME \_\_\_\_\_ BANNER ID \_\_\_\_\_  
Last First M. I.

JOB TITLE \_\_\_\_\_ REPLACING \_\_\_\_\_

EFFECTIVE DATE \_\_\_\_\_ END DATE (IF APPLICABLE) \_\_\_\_\_ INDEX \_\_\_\_\_

LABOR DISTRIBUTION \_\_\_\_\_ FULL TIME \_\_\_\_\_ PART TIME \_\_\_\_\_ TEMPORARY/PART-TIME \_\_\_\_\_

Scheduled to work - \_\_\_\_\_ hours per week \_\_\_\_\_ weeks per month \_\_\_\_\_ months per year

New Hire  Transfer  Rehire/Reappt.  Termination  Pay Change - Reason:  salary increase/decrease  
 Move from Student Payroll to Summer Biweekly Payroll  Title Change  work hours/FTE  
Salary \$ \_\_\_\_\_  paid annually (12 months)  leave with pay  
 paid over \_\_\_\_\_ months  leave without pay

Hourly Wage \$ \_\_\_\_\_

Additional Pay \$ \_\_\_\_\_  Stipend  One-time pay  Grant  
 Honorarium  Art  Non-Grant Funding  
 Comments \_\_\_\_\_

Place on **paid** FMLA Leave (employee using sick/vacation time)  
 Place on **unpaid** FMLA Leave (leave balance exhausted)  
 Return to work from FMLA Leave - Date \_\_\_\_\_ End date on FMLA (if known) \_\_\_\_\_  
 Place on **paid** Worker's Comp (employee using sick time)  
 Place on **unpaid** Worker's Comp (sick leave exhausted)  
 Return to work from Worker's Comp Leave - Date \_\_\_\_\_  
 Paid sabbatical commencing (date) \_\_\_\_\_ and ending (date) \_\_\_\_\_  
 Sabbatical at **half pay** (indicate new pay amount above) commencing (date) \_\_\_\_\_ and ending (date) \_\_\_\_\_

**Complete the following for terminating employees:** Last day actually worked \_\_\_\_\_

**Final payment to include:**  
Regular Pay through \_\_\_\_\_ (date) Additional vacation hours to be paid \_\_\_\_\_

Severance Pay (if any): \_\_\_\_\_

Reason for Termination:  regular termination or resignation  end of position/agreement  
 retirement  other \_\_\_\_\_

Mail last paycheck to: \_\_\_\_\_

Supervisor Comments \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date \_\_\_\_\_

**HR USE ONLY:**

Banner Entry \_\_\_\_\_ / \_\_\_\_\_ Paycom/Benefit Entry \_\_\_\_\_ Benefits Solver Enrollment \_\_\_\_\_ POSN # \_\_\_\_\_  
EXEMPT  NON-EXEMPT   
 PPAIDEN  PEAEMPL  NBAJOBS  PRUDENTIAL  TIAA  Deductions Verified/403B/GTL