NEW MEXICO TECH
SCIENCE • ENGINEERING • RESEARCH UNIVERSITY

Addition to Payroll (Student)

_____, 900XXXXXX
Student's Name Banner ID

Current Department Student is Employed by _____
(if none.... STOP.... This is the wrong form)

Agree to a one-time payment of _____ for services listed below.

Index_____ Account # _____ ST _____

Describe service provided in detail; **including date of service**):

_____

_____

_____

_____
Student Signature Date

I certify the above service is complete, true, and correct.

_____
Department Chair/PI Date

I certify the above service is complete, true, and correct.

_____
Graduate Dean Date

_____
Budget & Analysis/RFD Date

_____
Financial Aid Date

_____
V.P. Admin & Finance Date

Payroll Use Only:

Entered Stamp

Verified Stamp

Revised—28th Nov 2017

PP0007

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