

## Barton Community College Staff One-Time Payment Request Form

### Personal Data

Name Last	First	MI	Prefix Select From List	Suffix
SSN	Birth Date	Gender Select From List	Ethnicity Select From List	
Citizenship: Select From List <i>Note: As required by federal law, the College will only hire U.S. citizens and aliens authorized to work in the U.S.</i>				
Legal Mailing Address (Street, City, State, Zip Code)				
Phone (Area Code, Phone Number, Ext.) ( ) - Ext.				

### Assignment Information

Position Number Select From List	Suffix (HR Use Only)	Position Title	Brief Summary of Employee's Duties
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Fund	Orgn	Acct 520012	Program		Date (E.g. 12/31/10)	In	Out	In	Out	In	Out	Regular Hrs	Overtime Hrs					
Hourly Rate \$					Sun													
Work Begin Date					Mon													
Work End Date					Tues													
Regular Hours					Wed													
Overtime (OT) Hours					Thur													
Total Regular and OT Hours					Fri													
Lump Sum Payment (must be at least \$684 for each week or part of a week worked—otherwise, hourly unless exempt from the FLSA minimum salary requirement) \$					Sat													
WEEKLY SUBTOTAL ----->																		
The foregoing is an accurate record of the hours worked by me for the period indicated.  _____ Signature of Employee                      Date					Sun													
					Mon													
					Tues													
					Wed													
					Thur													
					Fri													
<b>Supervisor's Certification</b>  I certify that the above individual has rendered service to the College and that the payment should be charged as indicated above. To the best of my knowledge and belief, the analysis of productive hours reasonably represents the activity of the individual.  _____ Supervisor Signature  Phone _____ Date _____					Sat													
					WEEKLY SUBTOTAL ----->													
					TOTAL HOURS TO BE PAID ----->													

The One Time Payment Request form is to be used for "ad hoc" assignments, which do not last longer than one pay period. Employees in this group are not eligible for benefits.

- The College will only accept one form for an individual during a calendar year quarter. E.g., Jan-Mar, Apr-Jun, Jul-Sep, and Oct-Dec.
- This form shall not be used to pay individuals already working for the College in another capacity.
- The department must pay at least minimum wage.
- No lump sum payments will be paid without getting prior approval from the Office of Human Resources.
- One Time Payment Request Forms must be accompanied by a W-4, K-4, I-9, and Oath form. For repeat payees, please check to see if these forms must be resubmitted.