

The following information is provided to assist with the proper completion of the PCAF. This will help ensure that your requests are processed timely, and will not have to be sent back for correction or clarification.

- **Requested Pay Period**
  - The pay period number in which the payment is to be made (1701, 1702, etc.).
- **Employee Current Hire Date**
  - The most recent hire date for the job record indicated below (in the detailed rows).
- **Pay Groups**
  - PEU - Exception Hourly
  - POH - OPS Hourly
  - POS - OPS Salary
  - PS3 - 3 Month Faculty
  - PS9 - 9 Month Faculty
  - PSA - Administrative & Professional
  - PSF - 12 Month Faculty
  - PSU - Salaried Exempt
- **Job Record**
  - The employee's job record number which corresponds to the payroll adjustment being made.
- **Earnings Code**
  - REG - Regular Earnings
  - PPH - Prior Period Hours
  - OVT - Overtime (These hours will be paid at time and a half)
- **FTE (Full Time Equivalent)**
  - Enter the employee's FTE as indicated in job data.
- **Hourly/Biweekly Pay**
  - For hourly employees, enter their standard hourly rate as indicated in job data.
  - For salaried employees, enter their standard biweekly salary as indicated in job data.
  - *DO NOT PRORATE THE RATES OF PAY.*
- **Combo Code**
  - This is only to be used for a *ONE TIME* combo code override - this *WILL NOT* replace the employee's normal distribution.
- **Inclusive Dates to be Paid**
  - Enter the actual inclusive dates to be paid (first day to last day).
    - Example: If the pay period is 04/21/17-5/04/17 the date range on the PCAF could be entered as:
      - If the hire date was 4/24/17 - Inclusive dates would be 4/24/17-5/04/17
      - If the termination date was 4/28/17 - Inclusive dates would be 4/21/17-4/28/17
      - If the employee was eligible to work the entire pay period, but only worked 4/24/17-4/26/17 - Inclusive dates would be 4/21/17-5/04/17

**Employee Name**
**GEMS ID**
**GEMS Department Number**
**Requested Pay Period**
**Date Submitted**
**Employee Current Hire Date**
**Check One**

**ORIGINAL CERTIFICATION** – Employee was not on the online CERTS but is entitled to payment.

**CHANGES TO ORIGINAL CERTIFICATION** – Changes in hours on the online CERTS that have already been approved. This PCAF will replace ALL hours previously certified for the indicated pay period for the listed employee and their indicated record number(s).

**CORRECTED FORM** – Corrections to original submission of PCAF.

Please add 2nd page if more lines are needed.

Pay Group	Job Record	Earnings Code	Total Hours to be Paid	FTE	Hourly/Biweekly Pay	Combo Code* ( REQUIRED for all PPH hours listed )		Inclusive Dates to be Paid	
								To	
								To	
								To	
								To	
								To	
								To	
								To	
								To	

\*This one time combo code override WILL NOT change or replace the employee's normal, permanent distribution.

**Additional Comments**

***I certify that the individual listed above is an employee of the listed department and is entitled to the compensation reported on this form.***

**Prepared By**
**Prepared by Email**
**Certified By**
**Prepared by Telephone**