



On Demand Check Request Form

This form should only be completed if an employee has missed a paycheck and an on-demand payment is requested.

A \$50.00 fee will be charged to your department’s operation account if this is an employee or departmental error.

*Please ensure that any retroactive hours or job actions are approved in Workday prior to submitting this form, along with a Workday Help Case.

Employee’s Name:

Employee ID:

Department/Division:

Fund/Worktags:

Reason for Request:

Pay Period Begin Date	Pay Period End Date	Total Number of Hours to be Paid	Hourly Rate of Pay	Total Amount
			\$	\$

Prepared By:

(Please Print Your Name)

Telephone #:

Approved By:

(Please Print Your Name)

Approved By:

(Signature)

FOR HUMAN RESOURCES USE ONLY

If no \$50 fee was charged, the reason was due to HR error. Explain the error.

Verified this amount not previously paid:

FAPLAN Eligible:

Yes (OPS Ee)

No (Student of Benefits Eligible Ee)

On Demand Process Date:

Check #

Approved by:

Payroll

Benefits