



**OLD DOMINION UNIVERSITY  
PAYROLL STUDENT EMPLOYMENT  
ONE TIME SPECIAL PAYMENT FORM (E-1SP)**

*Submit this form with original signatures; Keep a copy for your records*

Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**ALL INFORMATION SHOULD BE TYPE WRITTEN**

<b>A. PAYEE INFORMATION</b>			
Organization/Department:	Budget Code:	Sub-Object Code:	BANNER Position #:
Last Name:	First Name:	University Identification Number (UIN):	Type of Student: <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate
Residency Status: <input type="checkbox"/> Citizen (C) <input type="checkbox"/> Permanent Resident (P) <input type="checkbox"/> Non-Resident Alien (N)	<b>B. SPECIAL PAY INFORMATION:</b>  Start Date: _____ End Date: _____  Payment Amount: \$ _____		Funding Period: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Session I <input type="checkbox"/> Summer Session II
<b>C. PAYMENT DETAILS:</b> (Please provide detailed information: i.e. DJ Services, Photography Services, Musical Performance Services, etc.)			
<b>D. APPROVING SIGNATURES</b> (*My signature certifies that this employee has completed an I-9 form and all other employment documentation)			
_____ *DEPT CONTACT REQUESTING PAYMENT	_____ DATE	_____ *BUDGET UNIT HEAD/DEAN/DIRECTOR	_____ DATE
<b>*** PAYROLL STUDENT EMPLOYMENT USE ONLY ***</b>			
<u>Student Enrollment:</u>  Current Semester: _____  Total Credit Hours: _____  <u>New Employee?</u> <input type="checkbox"/> YES <input type="checkbox"/> NO	<u>I-9 Employment Eligibility</u>  <input type="checkbox"/> New I-9 Received <input type="checkbox"/> I-9 on File  <u>Hiring Documentation</u>  <input type="checkbox"/> New Hiring Docs Received <input type="checkbox"/> Hiring Docs on File	<u>Payroll Student Employment Notes to Payroll Processing</u>  Effective Pay Period: _____  Effective Pay Number: _____  Student Specialist Sign Off: _____  Date Processed: _____  Reviewed By: _____	