

KNOX COLLEGE
GALESBURG, ILLINOIS 61401

- STUDENT PAY AUTHORIZATION -

To: Payroll Coordinator
K-147

Date:

From (Department):

To be completed by Department Head

_____ has been employed by us
beginning _____ at an hourly rate of _____ / or a
salary of _____ per month. Salary should be charged to Account # _____.

Approved by: _____

Date: _____

(To be completed by Personnel / Payroll Office)

ID Number _____

Position Code _____

Regular / Overload Pay

BIWK / STDT / MNTH

Beginning Date _____

End Date _____

Hourly _____

Salary _____

Signed: _____ entered by: _____ date: _____
(Payroll/Personnel)