

# Johns Hopkins Enterprise Off-Cycle Payment Request

<b>Date:</b>
<b>Employee Name:</b>
<b>Employee ID#:</b>

**For Bi-weekly or Weekly paid employee, check one:**    CATS    Kronos    Nightingale/Workforce  
 Time Sheet X

**Please check one of the following reasons:**

New Semi-Monthly employee who has worked more than 5 days. **(DO NOT SUBMIT OFFCYCLE UNTIL EA/ISR HAS BEEN PROCESSED AND APPROVED BY HR SHARED SERVICES)**

Date of New Hire EA/ISR:	EA/ISR Document #
--------------------------	-------------------

Semi-Monthly employee returning from Leave of Absence with no Pay **(DO NOT SUBMIT OFFCYCLE UNTIL ISR HAS BEEN PROCESSED AND APPROVED BY HR SHARED SERVICES)**

Date of Return EA/ISR:	EA/ISR Document #
------------------------	-------------------

Semi-Monthly Hourly employee to be paid for 8 regular hours or more.

Bi-Weekly or Weekly employee to be paid for 8 regular hours or more or for 8 overtime hours or more

Date hours were submitted/entered:
------------------------------------

Hours submitted by date and pay code (add more rows to the table if needed):

Date:	Pay code:	Hours:

**Please note the offcycle payment schedule:**

Bi-weekly payroll- payday Friday and the following Monday, Wednesday, Friday  
Semi monthly payroll- Monday, Wednesday, and Friday (except if Semi payroll is processing)  
Weekly payroll- payday Friday and the following Monday

**Payment method:**

- Check (even if employee has direct deposit. Check will be mailed home)
- Direct Deposit (Only if employee already had direct deposit. Deposit advice will be mailed home)

**Approval:**

Org. Unit Preparer's Name:
Org Unit Approver's Name:
Date:

**Incomplete forms will not be honored and the employee will receive their pay on the next payroll cycle.**