

Wichita State University
Prior Period Funding Change Form
*Use this form to request retroactive changes for Student,
 Graduate Assistant, Lecturer and Temporary (U3/U4) positions.*

Prepared by: _____ Ext: _____ Date of Request: _____

Budget Officer: _____ Org Code: _____

Employee name: _____ myWSU ID #: _____ Position #: _____

<u>Begin</u>	Year	Pay #	Start Date	<u>End</u>	Year	Pay #	End Date
_____	_____	_____	_____	_____	_____	_____	_____

Change from:

Fund Code	Org Code	Percentage
Must total:		100.00%

Change to:

Fund Code	Org Code	Percentage
Must total:		100.00%

Approvals:

Office of Research Administration: _____ Date: _____
 (if grant funded)

Budget Officer: _____ Date: _____

Budget Review Officer: _____ Date: _____

Send completed PDF to Payroll: payroll@wichita.edu or Campus Box 38