

URI PAYROLL IN-HOUSE REQUEST FOR CONTRACT CHANGE		
ALL CONTRACT JOBS: GRAD ASSISTANTSHIPS AND INTERNAL CONTRACTS		
REQUESTING DEPARTMENT		
DATE		
DEPT # AND DESCRIPTION		
EMPLOYEE		
PHONE # AND EMAIL		
REQUEST TO CHANGE		
EMPLOYEE NAME		
EMPLOYEE URI ID #	JOB EMPL RECORD #	
JOB TYPE		
REASON FOR CHANGE		
BUSINESS MGR APPROVAL SIGNATURE & DATE		
ENTER ONLY FIELDS YOU ARE REQUESTING A CHANGE FOR		
JOB CHANGES	CURRENT ON JOB	CHANGE TO
HIRE DATE		
TERM DATE		
DEPARTMENT NUMBER		
JOB CODE		
STANDARD HOURS		
FTE		
PAY GROUP		
EMPLOYEE TYPE (S or H)		
GRADE & STEP		
COMP RATE		
CONTRACT DATES		
EFFECTIVE DATE		
BEGIN DATE		
END DATE		
OTHER -		
GRAD ASSISTANTS ONLY		
CONTRACT PAY TYPE		
POSITION NUMBER		

APPROVALS	NAME & SIGNATURE	DATE
PAYROLL		
HUMAN RESOURCES		

Submit this form via email to contract_changes@etal.uri.edu