

Bi-Weekly Time Entry Adjustment Form Step-by-Step Guide

- 1) Enter the employee's information
 - a) Banner ID: Enter the employee's Banner ID, do not use Social Security Number
 - b) Name
 - c) Position and Suffix
 - d) Department Name
 - e) Organization Code
 - f) Preparer's name & phone number
 - g) Date of submission
- 2) Pay Period Number: Enter the pay period number which identifies when the original transaction occurred that requires the adjustment.
- 3) Adjust (+ or -):
 - a) If the information was originally incorrect use the "-" along with the original hours
 - b) On the next line use the "+" to indicate amount of hours that "should have been" processed.
- 4) Hours: Enter the number of hours for the adjustment
- 5) Earn Code: Enter the Earn Code associated with this adjustment
- 6) Shift: Enter the shift associated with this adjustment
- 7) Index:
 - a) Key in the index associated with the adjustment.
 - b) If the adjustment is for an index change only, submit a PHAREDS if the period has passed.
- 8) Adjustment Description:
 - a) Original transaction date of correction (if applicable)
 - b) Succinctly state the details of the change.
 - c) If this adjustment is for prior missed hours, stop and enter hours in Banner Department Time Entry or LoboTime in the current pay period using applicable missed prior hours earn code.
- 9) Time Entry Type: Circle the type of time entry which was used at the time of the original transaction.
Check either *Banner Department Time Entry* or *LoboTime*
 - a) Signatures: Obtain the employee, their supervisor and the department Banner Time Keeper/Approver or a Time Manager for LoboTime signatures and date

Bi-Weekly Time Entry Adjustment Form

Banner ID: 101234567		Name: Smith, John A.					
Position # & Suffix: SN0123-00		Dept.: University Office			Org Code: 123A		
**Preparer: Jane Chavez		Preparer Phone: 7-1234			Date: 5/1/2014		
Circle one:		Banner Dept. Time Entry			LoboTime		
Pay Period #	Adjust (+ or -)	Hours	Earn Code	Shift	Rate	Index	Adjustment Description <small>(Include date of original transaction)</small>
2R10	+	5.0	015	1	\$5.00	123456	Rate originally entered as regular base pay however should have been paid OT on 4/19 & 4/20. Employee was underpaid. Correction to employee's time

Employee's Signature _____ **Date** ___/___/___

Supervisor's Signature _____ **Date** ___/___/___

**Time Keeper/Approver or Time Manager's Signature _____

Deliver to: UNM Payroll Office at MSC01 1230

Payroll Office Use Only

Prepared by and Date:		Payroll Comments
PHAADJT by and Date:		
Intellichek by and Date:		
Check/DD Number:		