# DocuSign - Emergency Paycheck Request (EPR)

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DocuSign is an electronic signature application that enables users to securely sign/approve and send documents for approval from a computer or mobile device, at any time. The DocuSign agreement cloud assists in the entire contract process; preparing, signing, acting on, and managing documents.

# Access

# **Returning User**

Log in to <u>https://www.utrgv.edu/esign</u> with your UTRGV username and password.

# **First-time User**

Activate your esign account and setup your profile. Access to this service is automatically granted to UTRGV Faculty and Staff.

# Department Request to Add Electronic Signature (eSign) to Forms

If you would like to use an electronic signature with a form, you may submit a service request through the IT Support Center to get started.

# Training & Resources

Learn how to use DocuSign with free, self-paced online training. Visit the <u>DocuSign training page</u> for more information.

https://www.utrgv.edu/it/software/docusign/index.htm

# 2. Initiator (Supervisor/Proxy) :

# **PowerForm Signer Information**

UTRGV Emergency Paycheck Request (EPR)

The EPR form has been established for the request of emergency paychecks in the event where extenuating circumstances exist.

To ensure the expeditious delivery of email invitations to all designated signatories to execute the document, it is essential to accurately provide the appropriate name and email address for each designated signatory role indicated below.

Please note that providing an incorrect email address will cause the form to be null and void, and you will need to recreate it.

For any inquiries or assistance, please feel free to reach out to the Payroll Office at 956-665-2558 or via email at payroll@utrgv.edu.

Please enter your name and email to begin the signing process.

# **Department Contact**

## Your Name: \*

Department Contact Name

## Your Email: \*

department.contact.email@utrgv.edu

Please provide information for any other signers needed for this document.

#### Supervisor

#### Name: \*

Supervisor Name

#### Email: \*

supervisor\_email@utrgv.edu

## Director/ Dept Head/ Dean

#### Name: \*

Director Name

#### Email: \*

director\_email@utrgv.edu

## Vice President for department

#### Name: \*

Vice President Name

#### Email: \*

vicepresident\_email@utrgv.edu

## Notes:

Please click here to access the <u>DocuSign</u> – <u>Emergency Paycheck Request (EPR)</u> link.

Step 1: Supervisor or proxy fill in all the names and emails of signatories corresponding to the employee's department. Once it's complete, click on the 'BEGIN SIGNING'.

Please be advised that the form with incorrect email addresses will be deemed null and void, and the initiator will need to recreate the form.

Please contact us at 956-665-2558 or email payroll@utrgv.edu if you have any questions.

BEGIN SIGNING

## Please Review & Act on These Documents

Pavrol The University of Texas At Rio Grande Valley

An emergency Paycheck request has been routed to you for approval

I agree to use electronic records and signatures.

Please read the Electronic Record and Signature Disclosure.

Powered by DocuSign

CONTINUE

# Notes:

Step 2: The detailed instruction page will be displayed. Please read through the information carefully.

STOP: If you prefer to discuss your employee's specific situation with the Payroll team prior to completing this form, please reach out at 956-665-2558 or email at payroll@utrgv.edu.

If not, then click 'CONTINUE' to start filling out the EPR form on the following page.

Hiring Proposal was not prepared and routed by the supervisor prior to the current month's payroll deadline.

- Change of job data (CJD) was not prepared and routed by the supervisor prior to the current month's payroll deadline.
   Hiring Proposal or Change of job data (CJD) contained incorrect or incomplete information.
- Time records were incomplete and/or approved prior to current month's payroll deadline.
- · Employee failed to complete mandatory employment documents in Human Resources prior to the current month's payroll deadline.
- · Other situations not mentioned above.

#### Other Pay:

Emergency Paycheck Requests will not be issued for

- vacation payout
- overtime
- longevity
- · additional pay: examples include awards, supplements, overloads, cell phone allowances, additional pay earned in addition to base pay, etc.

#### All of above pay will be processed on the next scheduled payroll.

#### **Emergency Paycheck Request - the DocuSign Form:**

The supervisor is required to complete an Emergency Paycheck Request (EPR) form via DocuSign. The form should include the name and email address of the department's contact and approvers for DocuSign approval routing.

Supervisors may assign a proxy/department contact to complete the form. However, the supervisor needs to execute the signature, which will then be forwarded electronically to the next level of departmental approvers as indicated on the form.

Following the departmental approval, the form will be routed to the Payroll Office for assessment. After the Payroll Office concludes the review, the form will route by default to EVPFBA@utrgv.edu.

Upon approval by the Executive Vice President for Finance & Business Affairs and CFO, the completed document will be electronically routed to Payroll for processing, and HR and the supervisor will receive a copy for their records.

#### Payments to Salaried and Waged Employees:

The request should include the employee's name, PeopleSoft Employee ID (not student ID), Employee Record Number, the pay period for which the check is requested, document status, the reason for the request, the cause of emergency situation and missed payroll deadline, statement of employee hardship.

#### Timecards:

Approved copies of timecards for the period being requested for pay must be attached to EPR.

#### Direct Deposit:

All attempts will be made to process the Emergency Paycheck based on the employee's pay method selection; however, depending on the pre-scheduled payroll processing, the payment could result in a check versus direct deposit.

#### Emergency Paycheck Pay Date:

The Emergency Paycheck will be processed based on the availability within the set payroll calendar; this can take from 3-5 business days

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ate: 09/08/2023			
apervisor Name: Supervisor	Name		
mploying Department Name: De			
epartment Contact Name: Cont	act Name	Email Address: dept_c	ontact.email@utrgv.edu
MPLOYEE INFORMATIC	DN		
	STAFF FACULTY	WORK-STUDY DIRECT-WAGE	
ame:Employee Name	Employee ID#: 600000000	Employee Record#:0 Email Address:employee	e.email@utrgv.edu
ampus Location (City): City	name Building/Ro	om:9.999	
mergency Paycheck requested for	r the period (dates): From	n: 08/01/2023 To:08	/31/2023
OCUMENT(S) STATUS IN	FORMATION		
espond to the following:			
Hiring Proposal or other required	ed by Employee:	✓         Yes         Ifyus, state date:         08/01/2023           ✓         Yes         Ifyus, state date:         08/01/2023	No
Note: In order for an Emerg	gency Paycheck to be processed, all th	mecards must be in "Approved" status.	
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FINISH

# Notes:

Step 3: Fill in all the fields pertaining to the department, employee, and document status with the correct information, and include a detailed explanation of the reason for EPR.

Notes:

Step 4: Click 'FINISH.'

# UTRGV\_Emergency Paycheck Request



About Docu Sign

Sign documents electronically in just minutes. It's safe, secure, and legally binding. Whether you're in an office, at home, on-the-go -- or even across the globe -- DocuSign provides a professional trusted solution for Digital Transaction Management<sup>TM</sup>.

#### 7

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	Em	ergency Pa	aycheck F	lequest			
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Supervisor Name: Superviso	or Name						
imploying Department Name:	Department Name						
Department Contact Name: CO				Email A	.ddress: <u>dept_contac</u>	t.email@utrgv.e	<u>e</u> du
EMPLOYEE INFORMAT	ION						
	X STAFF A	CULTY 🗌	WORK-STUD	Y DIRE	CT-WAGE		
Name: Employee Name	Employee ID#: 60	0000000 E	Employee Reco	rd#: <u>0</u> Email Ad	dress: <u>employee.ema</u>	il@utrgv.edu	_
Campus Location (City): <u>City</u>	name	Building/Ro	om: 9,999				
mergency Paycheck requested	for the period (dates):	From	m: 08/01/	2023	To: 08/31/	2023	_
DOCUMENT(S) STATUS	INFORMATION						
Respond to the following:							
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<ul> <li>Hiring Proposal or other requir</li> </ul>				Yes If yes, state dat		No	
· Hiring Proposal or other requir		uman Resources:		Yes Ifyes, state dat Yes Ifyes, state dat		No	
<ul> <li>Employee completed mandator</li> <li>Timecard(s) prepared and subn</li> </ul>				Yes Ifyes, state dat Yes Ifyes, state dat		No	
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UTRGV\_Emergency Paycheck Request\_Rev\_09.07.2023.pdf

START

2 of 2

FINISH

Notes: Step 6: Supervisor clicks 'Sign.'

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ate: 09/08/2023				
pervisor Name: Superviso	r Name			
nploying Department Name: 1				
epartment Contact Name: Cor			 Email Address: dept. co	ontact.email@utrgv.
MPLOYEE INFORMAT			0000-000	reactionarrestigri
	X STAFF FACULTY	WORK-STUDY	DIRE CT-WAGE	
ame: Employee Name	Employee ID#: 60000000	00 Employee Record#: 0	Email Address: employee	.email@utrgv.edu
mpus Location (City): City		ding/Room: 9, 999		
nergency Paycheck requested :		From: 08/01/2023	To: 08	/31/2023
OCUMENT(S) STATUS	1 1 1	110hi 00/01/2025	10.00	51/2025
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			yes, state date: 08/01/2023 yes, state date: 08/01/2023	No
	ed document(s) approved administrative ed document(s) delivered to Human Re	, 1994	yes, state date: 08/01/2023	No
Employee completed mandatory			ves, state date: 08/01/2023	No No
Timecard(s) prepared and subm		<u> </u>	ves. state date: 08/01/2023	No
Timecard(s) prepared and subm			ves, state date: 08/01/2023	No
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EASON FOR EMERCEN Note: Requestor must explain w quested and provide a statement et ailed explanation of appervisor Comments NITIATOR: upervisor: PPROVALS:	NCY PAYCHECK REQUEST rhy Hiring Proposal and/or other requ at of employee hardship.) of reason for emergency i Supervisor Name	(PROVIDE A DETAILE) iired document(s) were not pro	spared/submitted prior to effe	9/8/2023
<b>REASON FOR EMERCEN</b> Iote: Requestor must explain w  quested and provide a statement  etailed explanation of  pervisor:  PPROVALS:  irector/ Dept Head/ Dean:	NCY PAYCHECK REQUEST rhy Hiring Proposal and/or other requ to of employee hardship.) of reason for emergency of supervisor Name Print Name	(PROVIDE A DETAILE) iired document(s) were not pro	pared/submitted prior to effe	9/8/2023 Date
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Kore Requestor must explain w Kote: Requestor must explain w etailed explanation of apervisor Comments NITIATOR: upervisor: IPPROVALS: insector/ Dept Head/ Dean: ice President:	NCY PAYCHECK REQUEST rhy Hiring Proposal and/or other requ to of employee hardship.) of reason for emergency in Supervisor Name Print Name Print Name	(PROVIDE A DETAILE) iired document(s) were not pro	spared/submitted prior to effe Supervise Supervise Signature Signature	9/8/2023 Date Date
KASON FOR EMERGEN     Kote: Requestor must explain v     guested and provide a statemen     tailed explanation     apervisor Comments     NITIATOR:     upervisor:     PPROVALS:     insector/ Dept Head/ Dean:     ice President:     KEVIEW:	NCY PAYCHECK REQUEST rhy Hiring Proposal and/or other requ at of employee hardship.) of reason for emergency of Supervisor Name Print Name Print Name Print Name	(PROVIDE A DETAILE) iired document(s) were not pro	spared/submitted prior to effe Supported Supported Signature Signature Signature	9/8/2023 Date Date Date Date
KASON FOR EMERGEN     Kote: Requestor must explain v     guested and provide a statemen     tailed explanation     apervisor Comments     NITIATOR:     upervisor:     PPROVALS:     insector/ Dept Head/ Dean:     ice President:     KEVIEW:	NCY PAYCHECK REQUEST rhy Hiring Proposal and/or other requ to of employee hardship.) of reason for emergency in Supervisor Name Print Name Print Name	(PROVIDE A DETAILE) iired document(s) were not pro	spared/submitted prior to effe Supervise Supervise Signature Signature	9/8/2023 Date Date
BASON FOR EMERCEN     Solution     Solu	NCY PAYCHECK REQUEST rhy Hiring Proposal and/or other requ at of employee hardship.) of reason for emergency to Supervisor Name Print Name Print Name Print Name	(PROVIDE A DETAILE) iired document(s) were not pro	spared/submitted prior to effe Supported Supported Signature Signature Signature	9/8/2023 Date Date Date
lote: Requestor must explain w quested and provide a statemen	Nov PAYCHECK REQUEST rhy Hiring Proposal and/or other requ to of employee hardship.) of reason for emergency of Supervisor Name Print Name Print Name Print Name	(PROVIDE A DETAILEI nired document(s) were not pro- request.	spared/submitted prior to effe Supported Supported Signature Signature Signature	9/8/2023 Date Date Date Date
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CRASON FOR EMERGEN Note: Requestor must explains w etailed explanation upervisor Comments NITLATOR: upervisor: PPROVALS: Director/ Dept Head/ Dean: Cice President: EVIEW: ayroll Department: FINAL APPROVAL:	Nov PAYCHECK REQUEST rhy Hiring Proposal and/or other requ to of employee hardship.) of reason for emergency of Supervisor Name Print Name Print Name Print Name	(PROVIDE A DETAILEI nired document(s) were not pro- request.	spared/submitted prior to effe Superviser Assoc Signature Signature Signature	9/8/2023 Date Date Date Date
Construction     C	Nov PAYCHECK REQUEST rhy Hiring Proposal and/or other requ to of employee hardship.) of reason for emergency of Supervisor Name Print Name Print Name Print Name	(PROVIDE A DETAILEI nired document(s) were not pro- request.	spared/submitted prior to effe Superviser Assoc Signature Signature Signature	9/8/2023 Date Date Date Date

# Notes:

Last step: Supervisor – After executing the document, click 'FINISH.'

FINISH

# **3.** Approval ( Director/Dept Head/Dean):

UTRGV\_Emergency Paycheck Request



DocuSign NA3 System <dse\_NA3@docusign.net>

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# Notes:

After the Supervisor concludes the review and executes the document, the request will automatically route to the next level of departmental approvers as indicated on the PowerForm. Director/ Dept Head/ Dean – Click 'REVIEW DOCUMENT' to review the EPR. EMPLOYEE INFORMATION

	@ Q ∓ <sup>⊥</sup> 🖬 찮	0
UTRGV THE UNIV	ERSITY OF TEXAS RIO G Emergency Paycheck Req	
Date: 09/08/2023		
Supervisor Name: Supervisor Name		
Employing Department Name: Department N	Name	
Department Contact Name: Contact Name		Email Address: dept_co

Email Address: dept\_contact.email@utrgv.edu

X STAFF FACULTY WORK-STUDY DIRECT-WAGE

\_ Employee ID#: 6000000000 Employee Record#: 0 Email Address: employee.email@utrgv.edu Name: Employee Name

Campus Location (City): City name	Building/Room: 9,	999			
Emergency Paycheck requested for the period (dates):	From: 08	/01/	2023	To: 08/3	31/2023
DOCUMENT(S) STATUS INFORMATION					
Respond to the following:					
<ul> <li>Hiring Proposal or other required document(s) prepared and subr</li> </ul>	nitted:	x	Yes Ifyes, state da	te: 08/01/2023	No No
· Hiring Proposal or other required document(s) approved adminis	tratively:	x	Yes Ifyes, state da	te: 08/01/2023	No
· Hiring Proposal or other required document(s) delivered to Huma	an Resources:	×	Yes If yes, state da	te: 08/01/2023	110
· Employee completed mandatory employment documents:		x	Yes Ifyes, state da	te: 08/01/2023	L No
· Timecard(s) prepared and submitted by Employee:		x	Yes If yes, state d:	te: 08/01/2023	110
<ul> <li>Timesard(a) approved by Timesard Approves</li> </ul>		x	Yes If yes, state da	te: 08/01/2023	No

Note: In order for an Emergency Paycheck to be processed, all timecards must be in "Approved" status.

• If applicable, will a reversal of direct deposit be required 🛛 Yes 🗶 No

#### REASON FOR EMERGENCY PAYCHECK REQUEST (PROVIDE A DETAILED EXPLANATION)

(Note: Requestor must explain why Hiring Proposal and/or other required document(a) were not prepared/aubmitted prior to effective date of pay period requested and provide a statement of employee hardship.)

Detailed explanation of reason for emergency request.

			Rav. 9/07/202
y: Signature of Executive Vi	ce President for Finance & Business Affai	rs and CFO Date	
omments:			
Route by default to EVPFBA@ Comments:	utrgv.edu	APPROVED NOT APP	ROVED
FINAL APPROVAL:			
Payroll Department:	Print Name	Signature	Date
REVIEW:			
	Print Name	Signature	Date
Vice President:			
Director/ Dept Head/ Dean:	Print Name	Signature	Date
APPROVALS:	Director Name	Director Home	9/8/2023
DBDOTH TO	Print Name	Signature	Date
Supervisor:	Supervisor Name	Supervisor Nouve	9/8/2023
NITIATOR:		City of Astronomy City of Astr	

Notes:

Director/ Dept Head/ Dean – After executing the document, click 'FINISH.'

2 of 2

4. Approval (Vice President for the department) :

UTRGV\_Emergency Paycheck Request



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## Notes:

After the Director/ Dept Head/ Dean executes the document, the request will automatically route to the Vice President for the department as indicated on the PowerForm. Vice President for the department - Click 'REVIEW DOCUMENT" to review the EPR.

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Date: 09/08/2023			
Supervisor Name: Supervis	or Name		
Employing Department Name:	Department Name		
Department Contact Name: CO		Email Address: de	pt_contact.email@utr
EMPLOYEE INFORMAT	IION		
	X STAFF FACULTY WORK-	STUDY DIRECT-WAGE	
Name: Employee Name	Employee ID#: 600000000 Employee	Record#: 0 Email Address: emp	loyee.email@utrgv.ed
Campus Location (City): City	name Building/Room: 9,9	99	
Emergency Paycheck requested	for the period (dates): From: 08/	01/2023	To: 08/31/2023
DOCUMENT(S) STATUS	INFORMATION		
Respond to the following:			
	ed document(s) prepared and submitted:	X Yes Ifyes, state date: 08/01/	2023 No
· Hiring Proposal or other requir	ed document(s) approved administratively:	X Yes If yes, state date: 08/01/	
	ed document(s) delivered to Human Resources:	X Yes Ifyes, state date: 08/01/	
<ul> <li>Employee completed mandator</li> </ul>		X Yes Ifyes, state date: 08/01/	
<ul> <li>Timecard(s) prepared and subr</li> </ul>		X         Yes         If yes, state date:         08/01/           X         Yes         If yes, state date:         08/01/	
<ul> <li>Timecard(s) approved by Time</li> </ul>	ceard Approver:	A res rryes, state date. 00/01/	1025
Note: In order for an Em	ergency Paycheck to be processed, all timecards	must be in "Approved" status.	
· If applicable, will a reversal of	direct deposit be required Yes X No		
(Note: Requestor must explain requested and provide a stateme Detailed explanation	NCV PAYCHECK REQUEST (PROVIDE A) why Hiring Proposal and/or other required document(s) and of employee hardship.) of reason for emergency request.		
(Note: Requestor must explain requested and provide a stateme	why Hiring Proposal and/or other required document(s) ant of employee hardship.)		
(Note: Requestor must explain requested and provide a stateme Detailed explanation Supervisor Comments INITIATOR:	why Hiring Proposal and/or other required document(s) ent of employee hardship.) of reason for emergency request.	were not prepared/submitted prior	to effective date of pay period
(Note: Requestor must explain requested and provide a statem; Detailed explanation Supervisor Comments INITIATOR: Supervisor:	why Hiring Proposal and/or other required document(s) ant of employee hardship.)		
(Note: Requestor must explain requested and provide a stateme Detailed explanation Supervisor Comments INITIATOR:	why Hiring Proposal and/or other required document(a) at of employee hardship.) of reason for emergency request. Supervisor Name	were not prepared/submitted prior	to effective date of pay period
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(Note: Requestor must explain requested and provide a statem; Detailed explanation Supervisor Comments INITIATOR: Supervisor: APPROVALS: Director/ Dept Head/ Dean: Vice President:	why Hiring Proposal and/or other required document(a) ant of employee hardship.) of reason for emergency request. Supervisor Name Print Name Director Name Print Name	were not prepared/submitted prior Supervise flast. Signature Worder flast. Signature	to effective date of pay period 9/8/2023 Date 9/8/2023 Date
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(Note: Requestor must explain requested and provide a statem; Detailed explanation Supervisor Comments INITIATOR: Supervisor: APPROVALS: Director/ Dept Head/ Dean: Vice President:	why Hiring Proposal and/or other required document(a) ant of employee hardship.) of reason for emergency request. Supervisor Name Print Name Director Name Print Name Vice President Name	were not prepared/submitted prior Supervise Ase. Signature Vireder Ase. Signature Vice President New Vice President New	to effective date of pay period 9/8/2023 Date 9/8/2023 Date 0/8/2023
(Note: Requestor must explain requested and provide a statemed and provide a statemed pro	why Hiring Proposal and/or other required document(a) ant of employee hardship.) of reason for emergency request. Supervisor Name Print Name Director Name Print Name Vice President Name Print Name	were not prepared/submitted prior Suprovier Assoc Signature Under Assoc Signature Use Provider Assoc Signature	to effective date of pay period 9/8/2023 Date 9/8/2023 Date 9/8/2023 Date 9/8/2023 Date
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(Note: Requestor must explain requested and provide a statement Detailed explanation Supervisor Comments INTLATOR: Supervisor: APPROVALS: Director/ Dept Head/ Dean: Vice President: REVIEW: Payroll Department: FINAL APPROVALE: Route by default to EVPFBA	why Hiring Proposal and/or other required document(a) ant of employee hardship.) of reason for emergency request. Supervisor Name Print Name Director Name Print Name Vice President Name Print Name Print Name	were not prepared/submitted prior Supervise Assoc Signature Vocaler Assoc Signature Va. Prosident Asso Signature Signature	to effective date of pay period 9/8/2023 Date 9/8/2023 Date 9/8/2023 Date 9/8/2023 Date
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# Notes:

Vice President for the department– After executing the document, click 'FINISH.'

# 5. Review by Payroll Office :

UTRGV\_Emergency Paycheck Request



То

DocuSign NA3 System <dse\_NA3@docusign.net>

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## Notes:

After the Vice President for the department executes the document, it will be routed to the Payroll Office for review.

Payroll - Click 'REVIEW DOCUMENT" to review the EPR.

Date: 09/08/2023					
Supervisor Name: Superviso	or Name				
Employing Department Name:			_		
Department Contact Name: CO			Email Address: dept_co	ntact.email@utrgv.ed	du
EMPLOYEE INFORMAT	ION				
	X STAFF FAC	ULTY WORK-STUDY	DIRECT-WAGE		•
Name: Employee Name	Employee ID#: 6000	0000000 Employee Record#: 0	Email Address: employee.	.email@utrgv.edu	_
Campus Location (City): <u>City</u>	name	Building/Room: 9,999			
mergency Paycheck requested	for the period (dates):	From: 08/01/2023	To: 08/	31/2023	
DOCUMENT(S) STATUS	INFORMATION				
Respond to the following:					•
<ul> <li>Hiring Proposal or other require</li> </ul>	ed document(s) prepared and sub	mitted: X Yes Ify	es. state date: 08/01/2023	No	
· Hiring Proposal or other require	ed document(s) approved admini	istratively: X Yes Ify	es, state date: 08/01/2023	No No	
Hiring Proposal or other requir		nan Resources: X Yes Ify	es, state date: 08/01/2023	_ No	
<ul> <li>Employee completed mandator</li> </ul>		<u> </u>	es, state date: 08/01/2023 es, state date: 08/01/2023	- No No	
<ul> <li>Timecard(s) prepared and subn</li> </ul>			es, state date: 08/01/2023	- H No	
<ul> <li>Timecard(s) approved by Time</li> </ul>	card Approver.				
Note: In order for an Eme	ergency Paycheck to be pro-	cessed, all timecards must be in	"Approved" status.		
,					
	direct deposit be required	Yes X No			
<ul> <li>If applicable, will a reversal of REASON FOR EMERCEE Note: Requestor must explain v</li> </ul>	NCY PAYCHECK REQU	EST (PROVIDE A DETAILED er required document(a) were not pre	pared/submitted prior to effec	tive date of pay period	ı
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If applicable, will a reversal of      REASON FOR EMERCE Note: Requestor must explain v equested and provide a stateme betailed explanation Supervisor Comments INTLATOR: Supervisor:  APPROVALS: Director/ Dept Head/ Dean: Vice President:	NCY PAYCHECK REQU why Hiring Proposal and/or oth at of employee hardship) of reason for emerge Supervisor Name Print Name Director Name Print Name	EST (PROVIDE A DETAILED er required document(s) were not pre ncy request.	Conception by Supervise Phase. Signature Outday from. Signature		
If applicable, will a reversal of <b>REASON FOR EMPRCE</b> Note: Requestor must explain v equested and provide a stateme      bectailed explanation      Supervisor Comments <b>INTLATOR:</b> Director/ Dept Head/ Dean:      Vice President: <b>REVIEW:</b>	NCV PAYCHECK REQU why Hiring Proposal and/or oth at of employee hardship) of reason for emerger Supervisor Name Print Name Director Name Vice President	EST (PROVIDE A DETAILED er required document(s) were not pre ncy request.	Supervise for Supervise for Supervise for Signature Signature Vice for fore Vice for fore	9/8/2023 Date 9/8/2023 Date 9/8/2023	
If applicable, will a reversal of <b>REASON FOR EMPRCE</b> Note: Requestor must explain v equested and provide a stateme      bectailed explanation      Supervisor Comments <b>INTLATOR:</b> Director/ Dept Head/ Dean:      Vice President: <b>REVIEW:</b>	NCV PAYCHECK REQU why Hiring Proposal and or oth at of employee hardship) of reason for emerged Supervisor Name Print Name Director Name Print Name Vice President Print Name	EST (PROVIDE A DETAILED er required document(s) were not pre ncy request.	Supervised by States Supervised by Supervised blanc Signature Vice Provided Home Signature Vice Provided Home Signature	9/8/2023 Date 9/8/2023 Date 9/8/2023 Date	
If applicable, will a reversal of      REASON FOR EMBRGES Note: Requested and provide a stateme Detailed explanation  Supervisor Comments  INITIATOR:  Supervisor:  APPROVALS:  Director/ Dept Head/ Dean:  Vice President:  REVIEW:  Payroll Department:	NCV PAYCHECK REQU why Hiring Proposal and/or oth a of employee hardship	EST (PROVIDE A DETAILED er required document(s) were not pre ncy request.	Supervise Place Supervise Place Supervise Place Signature Unclet Place Signature Vice Product Place Signature Vice Product Place	9/8/2023 Date 9/8/2023 Date 9/8/2023 Date 9/8/2023	
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FINISH

# Notes:

The payroll office will validate the request to ensure it meets the criteria outlined on the EPR instruction page.

- If all information is correct and complete, the payroll office will execute the document and select 'FINISH.'
- If the request does not meet the ERP criteria, the document will be rejected. The department contact (supervisor or proxy) will receive a notification detailing the reason for the rejection and the steps to rectify.

# UTRGV\_Emergency Paycheck Request



То

DocuSign NA3 System <dse\_NA3@docusign.net>

(i) If there are problems with how this message is displayed, click here to view it in a web browser.

UTRGV
The University of Texas
Rio Grande Valley UTRGV.edu
Payroll sent you a document to review and sign.
Payroll payroll@utrgv.edu
An emergency Paycheck request has been routed to you for approval
Powered by DocuSign
Do Not Share This Email This email contains a secure link to DocuSign. Please do not share this email, link, or access code with others.
Alternate Signing Method Visit DocuSign.com, click 'Access Documents', and enter the security code: 81D22D7DA5324E8297FC17A0F97350223
About Docu Sign Sign documents electronically in just minutes. It's safe, secure, and legally binding. Whether you're in an office, at home, on-the-go or even across the globe DocuSign provides a professional trusted solution for Dioital Transaction Management™.

## Notes:

Following Payroll approval, the form will route by default to the Executive Vice President for Finance & Business Affairs and CFO (EVPFBA) for final review and approval.

EVPFBA - Click 'REVIEW DOCUMENT" to review the EPR.

START

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Date: 09/08/2023			
Supervisor Name: <u>Supervis</u>	or Name		
Employing Department Name:	Department Name		
Department Contact Name: <u>Co</u>		Email Address: dept_con	<u>tact.email@utrgv.ed</u> u
EMPLOYEE INFORMAT	IION		
	X STAFF FACULTY WO	RK-STUDY DIRECT-WAGE	
Name: Employee Name	Employee ID#: 600000000 Emplo	oyee Record#: 0 Email Address: employee.e	mail@utrgv.edu
Campus Location (City): City	y name Building/Room:	9,999	
Emergency Paycheck requested		08/01/2023 To: 08/3	1/2023
DOCUMENT(S) STATUS			2,2025
Respond to the following:			
	red document(s) prepared and submitted:	X Yes If yes, state date: 08/01/2023	□ No
0 1 1	red document(s) prepared and submitted. red document(s) approved administratively:	X Yes If yes, state date: 08/01/2023	H No
	red document(s) approved administrativery. red document(s) delivered to Human Resources:	X Yes If yes, state date: 08/01/2023	No No
<ul> <li>Employee completed mandato</li> </ul>		X Yes Ifyes, state date: 08/01/2023	No
<ul> <li>Timecard(s) prepared and subr</li> </ul>		X Yes Ifyes, state date: 08/01/2023	No
Timecard(s) approved by Time		X Yes Ifyes, state date: 08/01/2023	No No
	ergency Paycheck to be processed, all timeca		
If applicable, will a reversal of	f direct deposit be required 🗌 Yes 🗶 No		
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UTRGV\_Emergency Paycheck Request\_Rev\_09.07.2023.pdf

2 of 2

# Notes:

EVPFBA – Click 'Approved' or 'Not Approved.' After that, click 'Sign.'

	Emergency Pay	rcheck Request		
Date: 09/08/2023				
Supervisor Name: <u>Supervis</u> Employing Department Name:				
Department Contact Name: CO		Email Address: dept. cor	ntact.email@utrgv.edu	tu .
EMPLOYEE INFORMAT			reactionarreactigricau	
	🗙 STAFF 🗌 FACULTY 🗌 V	VORK-STUDY DIRECT-WAGE		
Name: Employee Name	Employee ID#: 600000000 Em	ployee Record#: 0 Email Address: employee.	email@utrgv.edu	
Campus Location (City): City	y name Building/Room	n: 9.999		
Emergency Paycheck requested	d for the period (dates): From:	08/01/2023 To: 08/	31/2023	
DOCUMENT(S) STATUS	S INFORMATION			
Respond to the following:				
	red document(s) prepared and submitted:	X Yes Ifyes, state date: 08/01/2023	No	
	red document(s) approved administratively:	X Yes If yes, state date: 08/01/2023	No No	
<ul> <li>Hiring Proposal or other requi</li> <li>Employee completed mandato</li> </ul>	red document(s) delivered to Human Resources:	X Yes Ifyes, state date: 08/01/2023 X Yes Ifyes, state date: 08/01/2023	No	
<ul> <li>Timecard(s) prepared and sub-</li> </ul>		X Yes Ifyes, state date: 08/01/2023	No	
<ul> <li>Timecard(s) approved by Time</li> </ul>		X Yes Ifyes, state date: 08/01/2023	No	
Note: In order for an Em	tergency Paycheck to be processed, all time	cards must be in "Approved" status.		
,				
<ul> <li>If applicable, will a reversal of</li> </ul>	f direct deposit he required Vec V	N-		
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FINISH

Finish to send the completed document.

# Notes:

FINISH OTHER ACTIONS +

EVPFBA – After executing the document, click 'FINISH.'

# Completed: UTRGV\_Emergency Paycheck Request



DocuSign NA3 System <dse\_NA3@docusign.net> To O Payroll UTRGV

If there are problems with how this message is displayed, click here to view it in a web browser.

UTRGV\_Emergency Paycheck Request\_Rev\_09.07.2023.pdf PDF 571 KB



All signers completed UTRGV\_Emergency Paycheck Request

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## Notes:

After approval by the Executive Vice President for Finance & Business Affairs and CFO, the completed document will be electronically routed to Payroll for processing, and HR and the supervisor will receive a copy for their records. You have reached the end of the procedure.