

**Villanova University - Payroll Department**  
**Supplemental Payment Authorization (S.P.A.)**  
**Student Employees Only**

**\*\* INSTRUCTIONS \*\***

Use this form when authorizing supplemental payment for amounts outside of the students regular duties. You may list more than one employee, and/or more than one payment, on a single form, however, list only student employees on this form. Please submit in accordance with the appropriate biweekly pay schedule. All information must be completed below.

**Payment Schedule:** (choose one for each payment listed)

- (1) One time payment
- (2) Other \_\_\_\_\_  
\_\_\_\_\_

**Incomplete forms will be returned and may delay payment.** Forms must be submitted to the Payroll Office by the appropriate schedule deadline. Forms cannot be emailed or faxed. Original signatures only.

Name	Employee ID#	Description of services (attach support - dates, course #, etc.)	6-Digit Index No.	Acct No. (72xx)	Payment Schedule (# From Above)	Hourly rate	Payment

Completed by: \_\_\_\_\_  
Name

\_\_\_\_\_  
Date

Chair/Dean's Approval \_\_\_\_\_  
Name Date

Approved by: \_\_\_\_\_

\_\_\_\_\_  
Date

Payroll Review \_\_\_\_\_  
Name Date

**Must be approved by the Chair or Dean prior to submission to Payroll.**

**Forms submitted directly to Payroll without Chair or Dean's approval will not be processed.**