

Prepared by: \_\_\_\_\_ Ext: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Budget Officer: \_\_\_\_\_ Org Code \_\_\_\_\_

Employee name: \_\_\_\_\_ myWSUID #: \_\_\_\_\_ Position #: \_\_\_\_\_

Begin    Year    Pay #    Start Date  
\_\_\_\_\_

End    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: