

**University of Connecticut
Department of Human Resources**

**SPECIAL PAYROLL
REQUEST FOR WAIVER OF TIME OR EARNINGS**

Type of request: (check one)

New Hire

Continuation

Type of Waiver: (check one)

Time Limits (More than 12 months in a 24-month period)

Earnings (Paid more than \$12,000 in a 12-month period)

Both Time and Earnings Waiver

Employee Name:

Department:

Time Period: Start Date:

End Date:

Requested Earnings For This Period:

Reason For Requesting Waiver:

Signatures of Approval:

Department

Date

Dean/Director

Date

Human Resources

Date

Route completed form with Special Payroll authorization and other required backup documentation to Department of Human Resources, 9 Walters Avenue, Storrs, CT 06269-5075. Contact Dianne Dolat at (860) 486-0408 or dianne.dolat@uconn.edu if questions.