

Standard Payroll Adjustment Form

Salary Corrections

Employee Details

Employee Name: _____ Employee ID: _____

Department: _____ Position: _____

Payroll Adjustment Information

Pay Period Affected: _____ Effective Date of Correction: _____

Description of Salary Correction: _____

Reason for Adjustment: _____

Previous Salary: _____ Corrected Salary: _____

Supporting Documents

Attached Documents (if any): _____

Employee Signature & Date

Supervisor/Manager Signature & Date

HR/Payroll Approval & Date

Important Notes:

- Ensure all sections of the form are completed accurately before submission.
- Attach relevant documentation to support the salary correction request.
- Obtain all required approvals and signatures before routing to Payroll.
- This form is intended for salary corrections only; other payroll adjustments may require separate forms.
- Incomplete forms may delay processing of the salary correction.