

Courtesy Payroll Application

1. Name and address of person for whom courtesy payroll is requested.
Name _____
Address _____
Phone _____
Email _____

2. Job Description of the person requesting courtesy payroll _____

3. Has a personal background check been completed for this person? YES NO
If so, please provide a copy of the results to the conference office. If not, have the person complete and sign a background check authorization form.

4. Give the date and action number from the church board minutes where the decision was made to employ this person. _____

5. Will this person receive an annual evaluation? YES NO If so, by whom will this evaluation be conducted? _____

6. To whom is this person responsible _____

7. How will this person be paid? Hourly/Weekly/Salary What is the rate per period circled above? _____ OTHER _____ What is the gross pay? _____ (Paychecks are issued monthly. The employing entity will be responsible for gross wages, FICA taxes and in some cases retirement contributions. These payments will need to be made to the Conference Office by the 10th of each month following the receipt of the invoice.)

8. When is this employment arrangement expected to begin? _____ and when is it expected to end? _____

Signature of authorizing person _____

Print or type name _____

Position of person authorizing this application _____

Conference Approval Action #: _____

Approving Committee: _____

Approval Signature: _____

When the application is signed by both parties, it needs to be sent to the Conference for final approval. A copy will be sent to the authorizing person at the Church/School.