Lieuallen Administration 305 | 503-838-8490 | hr@wou.edu | wou.edu/hr

Request for Release of Payroll Check

Employee Identification

First Name	M.I.	WOU ID #
	First Name	First Name M.I.

Employee Certification

Year	Date of Payday (MM/DD/YYYY)		
	Date	Time	
	Year		

I, the above signed, request early release of my payroll check. I understand that I may not cash or deposit my payroll check prior to12:01 am on payday. Early cashing or depositing of the payroll check may be cause for disciplinary action.

Check Release Signature

