

Supervisory Organization Assistance Request

Note: Reassign, Edit and Inactivation Requests will be effective the date received by Payroll.

Create a New Supervisory Organization: (for a worker who has not previously been managing others or for a worker who needs to manage others outside their own organization):

First Name: _____ Last Name: _____

Effective Date (cannot be a future date): _____ UIN: _____

Worker Position Number & Title: _____

New Sup Org (Adloc) Number: _____ New Sup Org Name: _____

What existing supervisory organization should the new supervisory organization be a subordinate of?

Organization ID: _____ Manager: _____

Sup Org Number / Name: _____

Reassign Superior Organization: (change superior organization for an existing supervisory organization)

Organization ID: _____ Sup Org Number / Name: _____

Reassign to Organization ID: _____ Superior Number / Name _____

Edit Supervisory Organization Name: (Payroll Services cannot edit the number or manager name)

Supervisory Organization Number / Name: _____

Organization ID: _____ Edit Sup Org Name to: _____

Inactivate Existing Supervisory Organization: (NOTE: the supervisory organization must have no workers, subordinates, or unfilled positions to process your request. If any of these items exist, department must initiate business processes to empty)

Supervisory Organization Number / Name: _____

Organization ID: _____ Manager UIN: _____

If workers need to be moved from one supervisory organization to another within the same pay station, departments will need to initiate the business process of either Move Workers (Supervisory) or Move to New Manager. If moving between pay stations, department should initiate Change Job business process. Payroll services does not have the security role to start this process for you. Job Aids for these business processes are located in SSO in Workday Help in the Use Workday section. Sup Org Name/Number Changes may also require completion of the Adloc Additions / Changes / Deletion form.

Requested by: _____ Phone: _____ Date: _____

Submit to: payroll@tamu.edu fax: 979.845.4134 phone: 979.862.2898 or 979.845.7129

For Payroll Only: Date Received: _____	Ticket: _____	Processor: _____
New Org ID#: _____	<i>version 6 – 12.07.2021</i>	