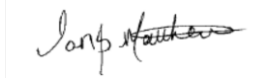


MEMORANDUM

To: Faculty and Staff

From: Ian B. Matthew-Clayton
Director of Human Resources Operations



Date: March 10, 2014

RE: Non-Tax Levy Payroll

The Divisions of Human Resources and Finance are pleased to announce that starting March 14, 2014, Automatic Data Processing Inc. (ADP) will be used for payroll processing of the college's non-tax levy payroll. The use of ADP will result in significant improvements and enhancements to the non-tax levy payroll including increased frequency of paychecks to employees from once a month to twice a month, the availability of direct deposit of paychecks into employee bank accounts, and online access to ADP's self service portal allowing employees to view paystubs, view W-2's, and update some demographic information.

Information on changes to paycheck dates, timesheet submission, direct deposit, and the self service feature has been outlined below.

New Paycheck Dates

The paycheck cycle for all non-tax levy employees will change from monthly paychecks to semi-monthly paychecks. All non-tax levy employees will be paid on the 15th and on the last business day of every month. When the 15th or the last day of the month falls on a weekend, the pay date will be the last business day before the weekend. For example, the paycheck scheduled for Saturday, March 15, 2014 will be paid on Friday, March 14, 2014.

There are two types of non-tax levy employees:

- 1) **Salaried employees:** Those who receive one monthly payment on the last business day of every month. Salaried employees will now receive two payments: one on the 15th and one on the last business day of every month. The first paycheck will be Friday, March 14, 2014.
- 2) **Hourly employees:** Those who receive one monthly payment on the first Friday after the 15th of every month. Hourly employees will now receive two payments: one on the 15th and one on the last business day of every month. The first paycheck will be Friday, March 14, 2014.

Timesheet Submission Deadlines (HOURLY NON-TAX LEVY EMPLOYEES ONLY)

Below is the revised timesheet submission schedule corresponding with the new semi-monthly payment schedule. All hourly non-tax levy employees must submit the revised non-tax levy timesheet (attached) according to the schedule below and indicated in the 2013 – 2014 Schedule of Pay dates for Non-Tax levy Employees (attached).

**DATES FOR SUBMITTING
TIMESHEETS TO THE
PAYROLL OFFICE**

PERIOD COVERED

PAY DATES

MARCH	03,2014	02/01/14 – 02/28/14	MARCH	14,2014
MARCH	17,2014	03/01/14 – 03/15/14	MARCH	31,2014
APRIL	01,2014	03/16/14 – 03/31/14	APRIL	15,2014
APRIL	16,2014	04/01/14- 04/15/14	APRIL	30,2014
MAY	01,2014	04/16/14 – 04/30/14	MAY	15,2014
MAY	16,2014	05/01/14 – 05/15/14	MAY	30, 2014
JUNE	02,2014	05/16/14 – 05/31/14	JUNE	13,2014
JUNE	16,2014	06/01/14 – 06/15/14	JUNE	30, 2014

Direct Deposit

Direct deposit of non-tax levy payments into employee’s bank accounts will now be available. If you are interested in direct deposit of your non-tax levy paycheck, please complete the attached direct deposit non-tax levy form and submit the form to HR/Payroll Services in Shepard Hall Room 92. Please allow two to three pay periods for processing of direct deposit requests.

Please Note: Direct deposit for non-tax levy paychecks is not associated with direct deposit for New York State tax levy paychecks.

Self Service Feature

An exciting new feature will allow non-tax levy employees direct access to view and update personal information in the ADP self service portal. Non-tax levy employees enrolled in direct deposit will also be able to view paycheck stubs. Additionally, W-2’s will be available for viewing and printing.

For employees who are not using direct deposit but still want access to the ADP self service portal, please send an email with your name and email address to Tomasz Makowski, Finance Coordinator at tmakowski@ccny.cuny.edu.

Employees enrolled in direct deposit and who entered their email address on the direct deposit non-tax levy form will automatically receive access to the employee self service portal.

If you have any questions or need additional information regarding the non-tax levy payroll, please contact Cherian George, Payroll Administrator at 212-650-7674, cgeorge@ccny.cuny.edu, or visit him in Shepard Hall Room 92.

CITY COLLEGE OF NEW YORK
2013 – 2014 SCHEDULE OF PAYDATES
FOR NON TAX LEVY EMPLOYEES

*ALL EMPLOYEES WILL BE PAID ON THE 15th AND THE LAST DAY OF EVERY MONTH**

HOURLY EMPLOYEES
COLLEGE ASSTS, STUDENT AIDES, TUTORS, NON TEACHING HRLY
& STUDENT ASSISTANTSHIPS

DATES FOR SUBMITTING
TIMESHEETS TO THE

PAYROLL OFFICE:

PERIOD COVERED:

PAY DATES:

MARCH	03,2014	02/01/14 – 02/28/14	MARCH	14,2014
MARCH	17,2014	03/01/14 – 3/15/14	MARCH	31,2014
APRIL	01,2014	03/16/14 – 03/31/14	APRIL	15,2014
APRIL	16,2014	04/01/14 - 04/15/14	APRIL	30,2014
MAY	01,2014	04/16/14 – 04/30/14	MAY	15,2014
MAY	16,2014	05/01/14 – 05/15/14	MAY	30, 2014
JUNE	02,2014	05/16/14 – 05/31/14	JUNE	13,2014
JUNE	16,2014	06/01/14 – 06/15/14	JUNE	30, 2014

PAYDATES FOR SALARIED NON TAX-LEVY EMPLOYEES

MARCH	14,2014	MARCH	31,2014
APRIL	15,2014	APRIL	30,2014
MAY	15,2014	MAY	30,2014
JUNE	13,2014	JUNE	30,2014

* Indicates situations in which the 15th or the last day of the month falls on a weekend. In these situations the pay day will be on the last business day before the weekend.

SUPERVISORS PLEASE NOTE:

Late submission of timesheets to the Payroll Office will delay the employees' pay until the following pay date. To avoid the inconvenience of employees not being paid on time, timesheets must be submitted on time.

NEW YORK STATE LABOR LAW COMPLIANCE

Under New York State Labor Law, employees may not work more than five (5) hours without a meal break. The meal period, a minimum of thirty minutes is unpaid.

Direct Deposit Form for Non-Tax Levy Payroll

(To be used for enrollment, changes and cancellations)

Section A: Employee Information	EMAIL _____
NAME (LAST, FIRST, MI) _____	WORK PHONE # (____) _____
DEPARTMENT _____	LAST 4 OF SS _____

Section B: Account Type	New or Additional *	Change Joint Account Holder *	Cancel	Name of Financial Institution	Account Number
<input type="checkbox"/> Savings <input type="checkbox"/> Checking	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

*For new/additional accounts with joint account holders or to add a joint account holder to existing accounts, both signatures are required in Section E.

Section C:

Please Attach A Void Check Copy Here

Section D: This section must be completed by your financial institution for new/additional accounts when directing funds into a savings account, or into a checking account if a voided check is not attached. The employee's name MUST appear on the account(s).

As a representative of the below named financial institution, I certify that this institution is ACH capable and agree to receive and deposit the salary to the account shown above in accordance with Part 102 of the Codes, Rules, and Regulations of the State of New York and to be bound by such rules. Salary credited to the account below will be available to the depositor on payday.

1. NAME OF FINANCIAL INSTITUTION _____ Account Type Savings Checking

Depositor's Account Number (EFT Format) _____ Routing Number _____

Print or Type Representative's Name	Signature of Representative	Telephone Number	Date
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Section E: Employee/Joint Account Holders Certification: I certify that I read and understand the instructions to this form, including the authorization for recovery. In signing this form, I authorize my salary payment to be sent to the designated financial institution to be deposited into the specified account. The joint account holders for an account listed in Section B, if any, must sign on the corresponding line for new/additional accounts or account holder(s).

Employee Signature _____ Date _____

B: Joint Account Holder _____ Date _____

This form is a legal document and cannot be altered by the agency, employee or financial institution.
If there are any changes, the employee must complete a new form.

INSTRUCTIONS: Please complete the form as described below, and then forward it to your agency/department payroll or personnel office. You can also contact that office for assistance in completing the form.

NEW/ADDITIONAL ACCOUNT OR CHANGES IN ACCOUNT HOLDERS: Employee **must** complete Sections **A, B, and D** for each new/additional account or for changes in account holders. See instructions below for Section **C**.

Section A: Indicate your name, work phone number, E-mail Address, Department, Last four of Social Security.

Section B: To enroll in direct deposit or add an account, place a check mark in the account type (checking or savings) and in the “New or Additional” column. For changes in account holders, place a check mark in the account type and in the appropriate “Change” column. Indicate the name of the financial institution, account number, and amount or percentage to be deposited.

- Please attach a copy of a voided check.
- Account number is obtained from a personal check, bank statement, or the financial institution.

Section C: For Savings Accounts, this section **must** be completed by your financial institution(s). For Checking Accounts, this section **must** be completed by your financial institution(s) if you are **not** attaching a voided personal check. The employee’s name **must** appear on the account.

Section D: The Employee/Joint Account Holder Certification **must** be signed by the employee in **all** instances and any joint account holder if this is a new/added account. By signing this form, the employee and any joint account holder each allows the State, through the financial institution, to debit the account in order to recover any salary to which the employee was not entitled or that was deposited to the account in error. This means of recovery shall not prevent the State from utilizing any other lawful means to retrieve salary payments to which the employee is not entitled.

CANCELLATIONS: The agreement represented by this authorization will remain in effect until canceled by the employee, the financial institution, or the State agency. To cancel the agreement, the employee **must** complete Sections **A, B and D** of a new Direct Deposit Form for the transaction(s) to be canceled. Joint account holder’s signature is not required. The financial institution may cancel the agreement by providing the employee and the State agency with a written notice 30 days in advance of the cancellation date. The financial institution cannot cancel the authorization without notification to both the employee and the State agency. The State agency may cancel an employee’s direct deposits when internal control policies would be compromised by this form of salary payment.

NOTE: Direct deposit advice statements are distributed by the enrollee’s agency. If the statement is unclaimed, it will be held by the agency for thirty (30) days after which time the statement will be destroyed.

New York State Personal Privacy Law Notification

The New York State Office of the State Comptroller Bureau of State Payroll Services requests personal information on this form to operate the New York State Direct Deposit/Electronic Funds Transfer Program. This information is being requested pursuant to State Finance Law §200(4) and Part 102 of Title 2 of the New York Codes, Rules and Regulations. The information will be provided to the designated financial institution(s) and/or their agent(s) for the purpose of processing payments, and for other official business of the Office of the State Comptroller. No further disclosure of this information will be made unless such disclosure is authorized or required by law. An employee’s failure to provide the requested information may delay or prevent the receipt of payments through the Direct Deposit/Electronic Funds Transfer Program. The information provided will be maintained in the State Payroll System under the direction of the Bureau of State Payroll Services.