



# Retroactive Salary Transfer Request Form

## Instructions:

This form is used to request cost transfers for salary and associated fringe benefits. Any cost transfer request related to a grant should follow the Vanderbilt Cost Transfer Policy for Sponsored Programs. Please fully complete Sections 1 through 4 and submit to Office of Contract and Grant Accounting (OCGA) at: [ocga-postaward@vanderbilt.edu](mailto:ocga-postaward@vanderbilt.edu).

## Section 1: Employee Information

Person Number: \_\_\_\_\_

Name (Last, First): \_\_\_\_\_

Assignment #: \_\_\_\_\_

Assignment Name: \_\_\_\_\_

Pay Cycle:

Academic      Biweekly      Monthly      Weekly

If adjustment is needed below the assignment level include appropriate element information below per the Award Compensation Resource Guide, <https://www.vanderbilt.edu/skyvu/files/HCM-Award-Compensation-Resource-Guide.pdf> :

\_\_\_\_\_

## Section 2: List All Pay Period(s) being adjusted

Note: Must indicate entire pay period, refer to Payroll Calendar, [https://www.vanderbilt.edu/skyvu/files/VU\\_Payroll\\_Calendar.pdf](https://www.vanderbilt.edu/skyvu/files/VU_Payroll_Calendar.pdf). Mid-pay period changes are not allowed.

1 \_\_\_\_\_

4 \_\_\_\_\_

7 \_\_\_\_\_

2 \_\_\_\_\_

5 \_\_\_\_\_

8 \_\_\_\_\_

3 \_\_\_\_\_

6 \_\_\_\_\_

9 \_\_\_\_\_

## Section 3: Justification for Change (only applies to changes made to externally funded grants)

Please attach cost transfer memo in accordance with the Cost Transfer Policy, [https://www.vanderbilt.edu/ocga/docs/vupolicies/costtransfers/VanderbiltUniversityCostTransferPolicy\\_Jan2018.pdf](https://www.vanderbilt.edu/ocga/docs/vupolicies/costtransfers/VanderbiltUniversityCostTransferPolicy_Jan2018.pdf).

## Section 4: Contact Information

HCM Specialist Name		Grants Manager Name (if applicable)		Date of Submission	

## Section 5: OGCA USE ONLY

Reviewed by	Date	Comments	Added to Retro Salary Transfer List