

Loudoun County Public Schools
Pay Frequency Change Form

Name: Mr.____ Mrs.____ Ms.____ _____
First Middle Last

PID/SSN: _____ Position: _____

Location: _____

COMPLETE AND SIGN

Pay Period Designation (Changes Only):

☐ I wish to change to semi-monthly paychecks (24 pays per year)

➡NOTE: Employees are given only one opportunity in a contract year to select. (Prior to beginning of contract year)

12 Month Employees – Form must be submitted by July 1st

11 Month Employees (Employees Contract Days 207 – 221) -- Form must be submitted by August 1st

10 Month Employees (Employees Contract Days less than 206) – Form must be submitted by August 15th

Reminder: Once this change has been made, employees may not return to monthly pay frequency.

Please return to:
LCPS
Payroll Division
21000 Education Court
Ashburn, Virginia 20148

Signature

Date

6/9/2010