



**CAL STATE LA**  
CALIFORNIA STATE UNIVERSITY, LOS ANGELES

# Payroll Services

---

Student Services Building, Room 6381  
CALIFORNIA STATE UNIVERSITY, LOS ANGELES  
5151 State University Drive, Los Angeles, CA 90032

---

**Phone**

T 323.343.3680

F 323.343.6477

---

**Web**

[calstatela.edu/hrm/payroll](http://calstatela.edu/hrm/payroll)

---

**E-Mail**

[payroll@calstatela.edu](mailto:payroll@calstatela.edu)

# Payroll Calendar

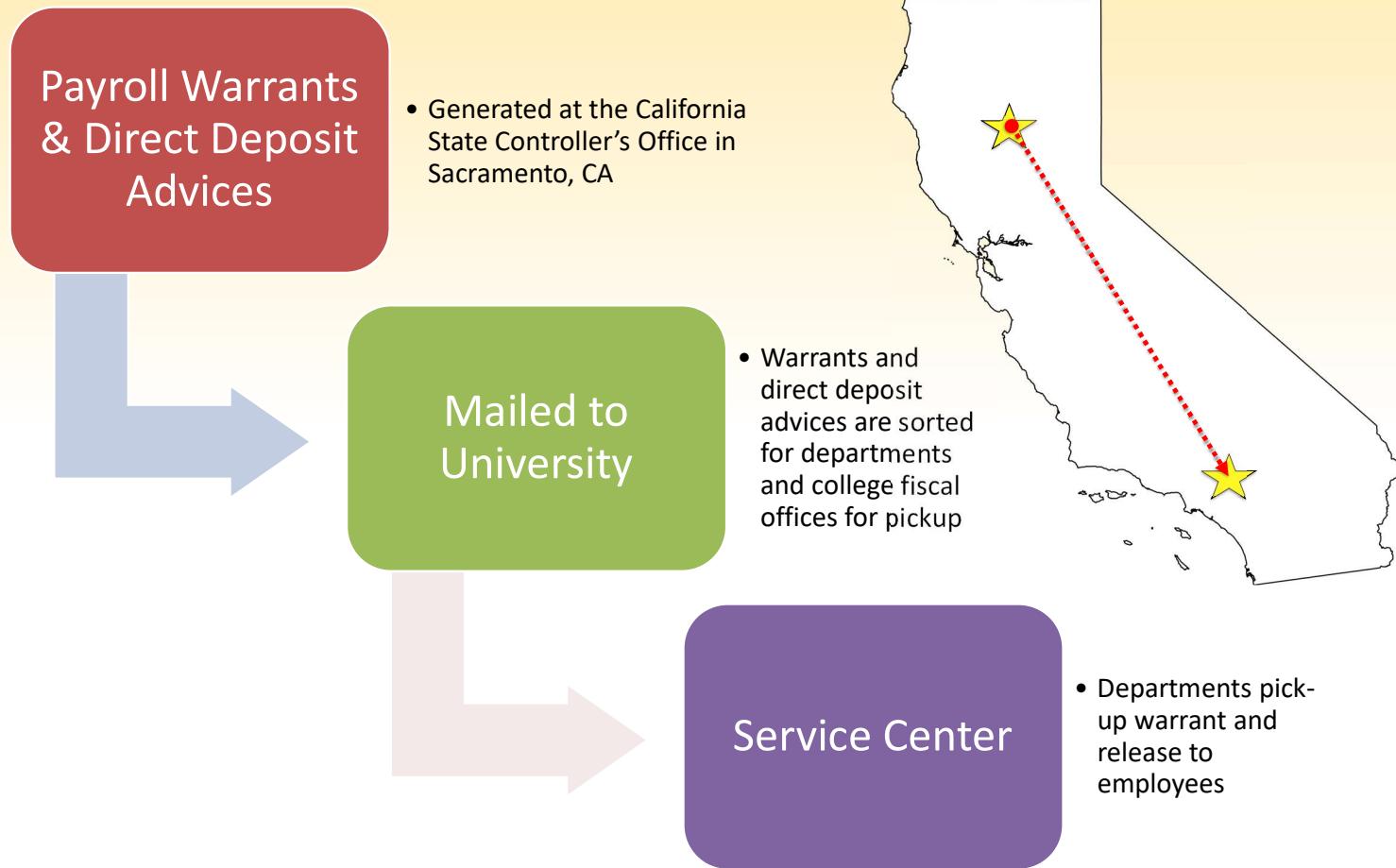
## ▪ **Types of Days**

- Academic Workdays – days for which academic employees may be appointed, report attendance, etc.
- Campus Closure – holidays, observed holidays, and University designated closure
  - Monday, December 30, 2021: report leave credits due to the University designated closure
- Master Payday – dates when paychecks and direct deposit advices are released to monthly salaried employee
- Student and Positive Attendance Pay Day – dates when paychecks are released to hourly employee
- Overtime, Shift Differential, and Stipend Payday – dates when paychecks are released to employees who
- **Final Attendance** – all corrections to absences and attendance is due by 10:00 AM
- ◆ **Approve** – all absences and attendance should be approved by this date
- # **Cutoff for Transactions Affecting Pay**
- ▲ **Payroll Master Cutoff**

<http://www.calstatela.edu/hrm/payroll-employee-information#payroll-calendar>

# Method of Distribution

*Payroll Warrants/Direct Deposit Advice*



# Cal Employee Connect

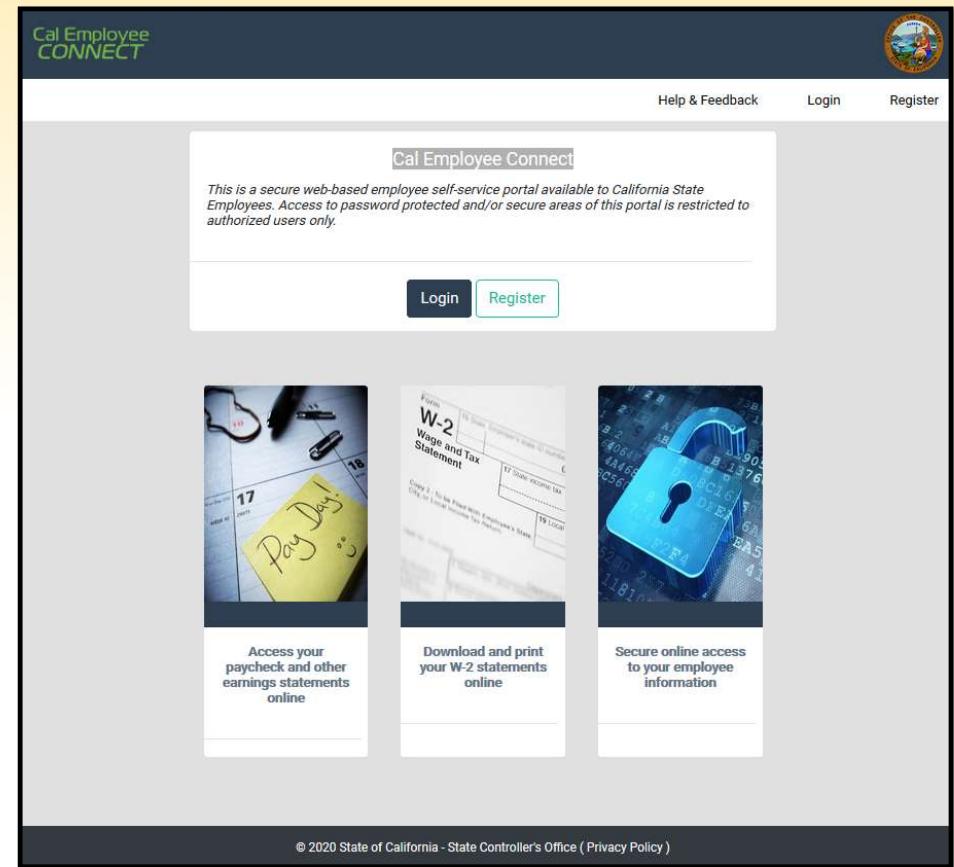
*State of California – State Controller's Office*

The State Controller's Office (SCO) is the Payroll "system of record" for the CSU. The SCO released Cal Employee CONNECT, the SCO's Employee Self-Service Portal application.

- Access the last three years of earnings statements
- Access the last four years of W-2s

Registration is easy and only takes a few minutes. You will need to provide your Social Security Number, date of birth, and some information from either a direct deposit advice or pay warrant notice. Upon successful validation, you will be asked to enter your email address and create a user name and password.

<https://connect.sco.ca.gov/>



The screenshot shows the homepage of the Cal Employee Connect portal. At the top, there is a dark header with the "Cal Employee CONNECT" logo on the left and "Help & Feedback", "Login", and "Register" buttons on the right. The main content area has a light gray background. At the top of this area, there is a banner with the text "Cal Employee Connect" and a subtext: "This is a secure web-based employee self-service portal available to California State Employees. Access to password protected and/or secure areas of this portal is restricted to authorized users only." Below the banner are two buttons: "Login" (dark blue) and "Register" (light blue). The main content is divided into three sections, each with an image and text:

- Access your paycheck and other earnings statements online** (Image: A calendar with a yellow sticky note that says "Pay Day!")
- Download and print your W-2 statements online** (Image: A W-2 tax form)
- Secure online access to your employee information** (Image: A blue padlock on a digital background)

At the bottom of the page, there is a dark footer bar with the text "© 2020 State of California - State Controller's Office ( [Privacy Policy](#) )".

# Direct Deposit & Warrant/Advice

## *Payroll Warrants/Direct Deposit Advice*

## **Direct Deposit**

- **4-6 weeks processing time to enroll, cancel, or change**
  1. Certified by payroll office
  2. Mailed to State Controllers' Office for processing
  3. Contact our office at [payroll@calstatela.edu](mailto:payroll@calstatela.edu) after two pay periods to follow-up on enrollment if you are still receiving payroll warrants

## Warrant/Advice Overview

- a) Warrant/Advice number
- b) Name
- c) Pay Period
- d) Issue Date
- e) Federal Tax Status
- f) State Tax Status
- g) Gross Earnings
- h) Taxable Earnings
- i) Total Deductions
- j) Net Pay
- k) Year-To-Date
- l) Earnings Types
- m) Deductions Detail
- n) Employer Contributions
- o) State Controller's Office Message

STATE OF CALIFORNIA

DIRECT DEPOSIT ADVICE

DIRECT DEPOSIT NUMBER  
a 00-000000

DOLLARS	CENTS
\$0000.00	

TO E E NAME

233-000

AGENCY UNIT

*NOT  
NEGOTIABLE*

CALIFORNIA STATE CONTROLLER

When changing accounts or financial institutions, notify your personnel office immediately.  
Do not close your old account until you have received your first payment in your new account.

STATE OF CALIFORNIA

STATEMENT OF EARNINGS AND DEDUCTIONS

OFFICE OF STATE CONTROLLER

E E NAME **b** PAY PERIOD 00/00  
AGY/UNIT 233-000 **d** PAY ISSUE DATE 00/00/00  
TAX STATUS **e** FED S-00 **f** STATE S-00  
TAX STATE **g** GROSS PAY **h** TAXABLE GROSS **i** DEDUCTIONS **j** NET PAY  
DIRECT DE # 00-000000  
BANK TRANSIT 00000000

REGULAR	GROSS PAY	TAXABLE GROSS	DEDUCTIONS	NET PAY
CURRENT	<b>g</b> 00000.00	<b>h</b> 00000.00	<b>i</b> 00000.00	<b>j</b> 00000.00
YEAR-TO-DATE EARNINGS	<b>k</b> 00000.00			
	DAYS	HOURS		

FEDERAL TAX	.00
STATE TAX	.00
RETIREMENT	.00
SOC SEC	.00
MEDICARE	.00
*F KAISER	.00
DELTA II	.00
VIS-VSP	.00
LTD STANDARD	.00
*457 PLAN	.00
*PARKING	.00
*VSP PREMIER	.00

EMPLOYER CONTRIBUTIONS (e.g., and adjustments)

RETIREMENT	SOC SEC	HLTH/FLEX
.00	.00	.00
MEDICARE	DENTAL	VISION
.00	.00	.00
LTD INS		
.00		

n	

YOUR 2018 W-2 WILL BE MAILED TO THE ADDRESS LISTED BELOW. IF THIS ADDRESS IS INCORRECT, PLEASE SEE YOUR PERSONNEL/PAYROLL OFFICE. A CHANGE OF ADDRESS MUST BE COMPLETED BY DECEMBER 14, IN ORDER FOR YOUR W-2 TO BE MAILED TO YOUR CORRECT ADDRESS. IF YOU HAVE ANY QUESTIONS REGARDING THIS NOTICE, PLEASE CONTACT YOUR PERSONNEL/PAYROLL OFFICE.

# Mandatory Deductions

## *Payroll Warrants/Direct Deposit Advice*

- **Federal Taxes**
- **State Taxes**
- **Retirement Plans (eligibility varies)**
  - CalPERS – percentage varies with position, date of eligibility and year
    - New members are currently contributing 7.25%
    - Social Security Tax – 6.2%
    - Medicare Tax – 1.45%
  - Savings Plus: Part-time, Seasonal, and Temporary Employees Retirement Program (PST)
    - Employee contributions – 7.5%
    - Medicare Tax – 1.45%
- **Assignment of Wages (if applicable)**
- **Garnishment/Levy (if applicable)**

STATE OF CALIFORNIA		STATEMENT OF EARNINGS AND DEDUCTIONS			OFFICE OF STATE CONTROLLER	
E E NAME		PAY PERIOD 00/00			0000	
AGY/UNIT 233-000		TAX YEAR 00			DIRECT DEP # 00-0000000	
		ISSUE DATE 00/00/00			BANK TRANSIT 0000000000	
TAX STATUS FED S-00		STATE S-00				
GROSS PAY		TAXABLE GROSS			DEDUCTIONS	NET PAY
CURRENT 00000.00		00000.00			00000.00	00000.00
YEAR-TO-DATE <sup>1</sup> 00000.00						
EARNINGS		DAY	HOURS	GROSS	DEDUCTIONS	AMOUNT
REGULAR				00000.00	FEDERAL TAX	.00
					STATE TAX	.00
					RETIREMENT	.00
					SOC SEC	.00
					MEDICARE	.00
					ATM	.00
					DELTA II	.00
					VIS-VSP	.00
					LTD STANDARD	.00
					X457 PLAN	.00
					X PARKING	.00
					X VSPP PREMIER	.00
EMPLOYER CONTRIBUTIONS (partial and adjustments)						
RETIREMENT	SOC SEC	HLTH/FLEX				
.00	.00	.00				
MEDICARE	DENTAL	VISION				
.00	.00	.00				
LTD INS						
.00						

# Voluntary Deductions

*Payroll Warrants/Direct Deposit Advice*

**Including, but not limited to:**

- Health Insurance Premium
- Dental Insurance
- Vision Insurance
- Life Insurance
- Parking and Transportation
- Voluntary Retirements & Savings Programs
- Additional Federal/State Tax Deductions

STATE OF CALIFORNIA		STATEMENT OF EARNINGS AND DEDUCTIONS			OFFICE OF STATE CONTROLLER	
E E NAME AGY/UNIT 233-000		PAY PERIOD 00/00		DIRECT DEP # 00-0000000 BANK TRANSIT 000000000		
TAX YEAR 00		ISSUE DATE 00/00/00				
TAX STATUS FED S-00		STATE S-00				
	GROSS PAY	TAXABLE GROSS	DEDUCTIONS	NET PAY		
CURRENT	00000.00	00000.00	00000.00	00000.00		
YEAR-TO-DATE <sup>1</sup>	00000.00					
EMOLUMENTS	DAY	HOURS	GROSS	DEDUCTIONS	AMOUNT	
REGULAR			00000.00	FEDERAL TAX STATE TAX RETIREMENT SOC SEC MEDICARE	.00 .00 .00 .00 .00	
				*F KAISER DELTA II VIS-VSP LTD STANDARD *457 PLAN *PARKING *VSPPREMIER	.00 .00 .00 .00 .00 .00	
EMPLOYER CONTRIBUTIONS (partial and adjustments)						
RETIREMENT	SOC SEC	HLTH/FLEX				
.00	.00	.00				
MEDICARE	DENTAL	VISION				
.00	.00	.00				
LTD INS						
.00						

# Lost or Stolen Payroll Warrants

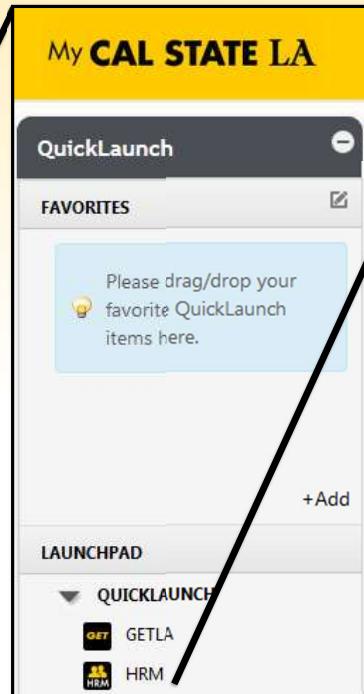
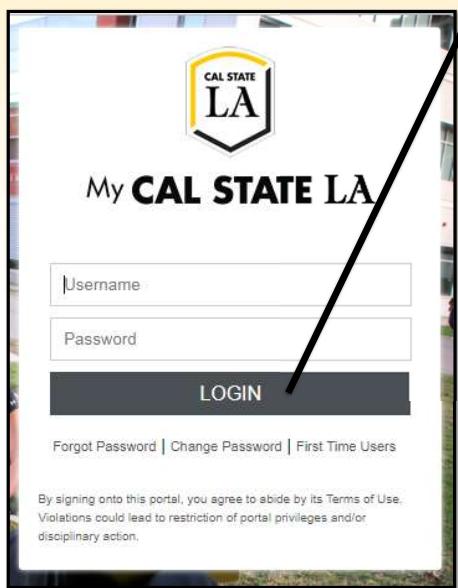
## *Payroll Warrants/Direct Deposit Advice*

**If you are not enrolled into direct deposit it may take between 4-6 weeks to issue a replacement warrant. Use either method to notify us of the lost warrant.**

1. Report lost or stolen warrant to payroll office.
  - a. Department administrator or assistant may e-mail [payroll@calstatela.edu](mailto:payroll@calstatela.edu) with the following:
    - Employee name
    - Pay period
    - Payment type (e.g. regular monthly pay, overtime pay, shift, etc.)
    - Reason for request
  - b. Visit our office with the following:
    - Valid government issued ID
    - Pay period
    - Payment type (e.g. regular monthly pay, overtime pay, shift, etc.)
    - Expected gross earnings
2. Our office will file a request for replacement warrant with the State Controller's Office.
3. The State Controller's Office will verify funds on warrant:
  - a. If funds are still available a replacement check will be issued and mailed to the payroll office.
  - b. If funds are no longer available, our office will be notified. We will contact you and additional paperwork and efforts must be made with you and the State Controller's Office.

# Online Address Changes

Visit [my.calstatela.edu](http://my.calstatela.edu) to access the HRM self-service menu to review and update your current home and mailing addresses.



Navigate from the “Main Menu” to the “Home and Mailing Address” page.

**NOTE: Do not use the “GETLA” quick launch link. Due to authentication issues, either use a different browser or clear your browser cache and restart your browser.**

# Tax Withholding Status

Complete the “Employee Action Request” (EAR) form to update your tax withholding Status.

1. Section B: Select “\*Address Change”
2. Section C: Complete the following fields
  - A. Social Security Number
  - B. Employee Last Name
  - C. First Name and Middle Initial
3. Section E: Complete the following
  - A. Federal and State Allowance **AND**
  - B. Special Treatment of State Allowances (if applicable) **AND**
  - C. Additional Deductions (if applicable)

OR

- A. Exemption from Withholding

4. Section I: Sign and date form

Remember to retain a copy for your records

**STATE OF CALIFORNIA – STATE CONTROLLER'S OFFICE  
EMPLOYEE ACTION REQUEST**  
STD. 886 (REV 12/2020)(FRONT)

Who is authorized to receive your pay warrant in case of death? Contact your personnel office to update your designee's name or address (Form STD. 243).

**CHECK ONE OR MORE BOX(ES) AND COMPLETE LISTED SECTIONS.**

**1**  **B** 01 **New Employee** SECTIONS C, E, F, G, H, I      03  **Withholding Allowance Change** SECTIONS C, E, I      04  **\*Address Change** SECTIONS C, F, I      05  **Name Change** (Attach substantiation) SECTIONS C, H, I

**2**  **C** 01 SOCIAL SECURITY NUMBER      02 EMPLOYEE LAST NAME      03 FIRST NAME AND MIDDLE INITIAL

**3** **E** **WITHHOLDING CHANGE OR NEW EMPLOYEE** **\*\*\*IMPORTANT\*\*\*** Before completing Section E, you must read the instructions on Internal Revenue Service (IRS) Form W-4 and the applicable State form (For California, Form DE-4). **I. FEDERAL WITHHOLDING** - If no tax should be withheld, complete box 03, Part IV or V only. **II. STATE ALLOWANCES** - If no tax should be withheld, complete Part IV or V only. **III. ADDITIONAL DEDUCTIONS** - Part I and II must be completed. Complete Part III if you are entitled to additional Federal and/or State tax withholdings. **IV. EXEMPTION FROM WITHHOLDING** - Write/type EXEMPT in box 03 if you are eligible to claim exemption from Federal withholding. **V. TAXABLE WAGES** - Check box 14 if wages you will receive are not subject to income tax withholding. **VI. SIGNATURE** - I certify that the information I have provided is true and correct and that I have read the IRS Form W-4 and the applicable State form. Under the penalties of perjury, I certify that the number to which I am entitled to the tax-free exemption from withholding, I certify that I incurred no tax liability for last year and that I anticipate that I will incur no tax liability for this year. I authorize my employer via the State Controller's Office to refund any overcollection of current/prior year Federal, State, Social Security and Medicare taxes; I certify that I shall not claim a tax refund or credit for these overcollections.

**F** **ADDRESS CHANGE OR NEW EMPLOYEE** \*See reverse.  
01 EMPLOYEE ADDRESS (Street, Rural Route, or P.O. Box)      02 CITY      03 STATE      03 ZIP CODE  
04 EMPLOYMENT LIST  
 Check this box and enter your phone number(s) if your address is changing and your new name appears on any departmental employment list. (See reverse.)      WORK PHONE      HOME PHONE

**G** **NEW EMPLOYEE - THIS INFORMATION MUST BE LOCATED PRIOR TO SIGNING**  
01 LAST EMPLOYED BY CALIFORNIA AGENCY      02 LAST NAME (if different)      03 SEPARATED      04 LAST EMPLOYED BY CALIFORNIA PUBLIC AGENCY OF: (City, County, Public School, Utility, etc.)      05 LAST NAME (if different)      06 SEPARATED  
MO      YR      MO      YR

**H** **BIRTHDATE**      04 **EMPLOYEE'S SIGNATURE**  
MO      DAY      YR

**I** **EMPLOYEE'S SIGNATURE**  
I certify that the above information is true and correct and that I have read the IRS Form W-4 and the applicable State form. Under the penalties of perjury, I certify that the number to which I am entitled to the tax-free exemption from withholding, I certify that I incurred no tax liability for last year and that I anticipate that I will incur no tax liability for this year. I authorize my employer via the State Controller's Office to refund any overcollection of current/prior year Federal, State, Social Security and Medicare taxes; I certify that I shall not claim a tax refund or credit for these overcollections.

**J** **PERSONNEL OFFICE USE**  
REVIEWER'S SIGNATURE  
DATE      PHONE NUMBER

# Leave Credits

- **Personal Holiday**
  - 1 day of paid leave per calendar year
    - Must be used by the end of the calendar year or it will be forfeited
- **You earn sick and vacation leave credits if you work a minimum of 11 days in a pay period. You cannot use any accruals in the same pay period it is earned.**
  - **All accruals are prorated to your time base.**
    - Working 40 hours per week
      - Maximum accrual: 8 sick hours per pay period
    - Working less than 40 hours per week
      - For example: employees working 20 hours a week will earn 4 sick hours per pay period
  - **Sick Leave**
    - Accruals: maximum 8 hours per pay period, prorated to your time base
    - No maximum sick leave balance
  - **Vacation Leave** (see next page for “Graduated Vacation Chart”)
    - Accruals are based on absence service credit requirements, prorated to your time base
      - For example: a brand new full-time employee will earn 6.667 hours per pay period
    - Maximum year-end balance is based on bargaining unit
      - For example: a unit 2 employee’s maximum year end balance is 320 hours

# Graduated Vacation Chart

Accrual and maximum year-end balance is based on service requirements and bargaining unit, prorated to your time base.

SUMMARY OF VACATION ACCRUAL RATES			SUMMARY OF MAXIMUM VACATION AND CTO CREDITS					
SERVICE REQUIREMENTS*	MONTHLY VACATION ACCRUAL RATE	DAYS ACCRUED PER YEAR	BARGAINING UNIT OR CLASSIFICATION	ANNUAL CTO MAX*	FLSA ANNUAL CTO MAX**	MAX VACATION: LESS THAN 10 YEARS OF SERVICE	MAX VACATION: MORE THAN 10 YEARS OF SERVICE	
0-3 YEARS: 1 TO 36 MONTHS	6 2/3 HOURS	10	M98	N/A	N/A	480 HOURS	480 HOURS	
3-6 YEARS: 37 TO 72 MONTHS	10 HOURS	15	M80	N/A	N/A	384 HOURS	440 HOURS	
6-10 YEARS: 73 TO 120 MONTHS	11 1/3 HOURS	17	UNIT 1	N/A	N/A	272 HOURS	384 HOURS	
10-15 YEARS: 121 TO 180 MONTHS	12 2/3 HOURS	19	UNIT 2	120 HOURS	240 HOURS	320 HOURS	440 HOURS	
15-20 YEARS: 181 TO 240 MONTHS	14 HOURS	21	UNIT 3	N/A	N/A	320 HOURS	440 HOURS	
20-25 YEARS: 241 TO 300 MONTHS	15 1/3 HOURS	23	UNIT 4	120 HOURS	240 HOURS	320 HOURS	440 HOURS	
OVER 25 YEARS: 301 MONTHS AND UP	16 HOURS	24	UNIT 5	120 HOURS	240 HOURS	320 HOURS	440 HOURS	
VACATION ACCRUAL RATES FOR ELIGIBLE CLASSIFICATIONS IN		16	24	UNIT 6	240 HOURS	240 HOURS	272 HOURS	384 HOURS
EXECUTIVE (M98), MANAGEMENT (M80), CONFIDENTIAL (C99), FACULTY (UNIT 3) AND ACADEMIC STUDENT (UNIT 11)				UNIT 7	120 HOURS	240 HOURS	320 HOURS	440 HOURS
		16	24	UNIT 8	200 HOURS***	480 HOURS	272 HOURS	384 HOURS
				UNIT 9	120 HOURS	240 HOURS	320 HOURS	440 HOURS
		16	24	UNIT 10	240 HOURS	240 HOURS	272 HOURS	384 HOURS
				UNIT 11	N/A	N/A	80 HOURS	80 HOURS
		16	24	UNIT 12	N/A	N/A	272 HOURS	440 HOURS
				E99	120 HOURS	240 HOURS	272 HOURS	384 HOURS
		16	24	C99	120 HOURS	240 HOURS	384 HOURS	440 HOURS

\* In terms of full-time service

4/28/18

\*PER MOU/Policy

\*\*PURSUANT TO FAIR LABOR STANDARDS ACT

\*\*\*REFER TO APPROPRIATE MOU

# Absence Management

**Navigation:** [Main Menu](#) > [Self Service](#) > [Time Reporting](#) > [Report Time](#) > [Report and View Absences](#)

- Always report absences within the pay period
- You must report “No Leave Taken” if there are no absences to report.

Favorites ▾ Main Menu ▾ > Self Service ▾ > Time Reporting ▾ > Report Time ▾ > Report and View Absences

**CAL STATE LA**

Report and View Absences

Employee Name  
00000000 0

Job Classification 0000  
Department Name 000000

[Click for Instructions](#)

From  Through

**Existing Absence Events**

Absence Name	Begin Date	End Date	Absence Duration	Unit Type	Absence Status	Last Updated By

**Enter New Absence Events**

Absence Name	*Begin Date	*End Date	Absence Duration	Unit Type	
	<input type="text" value="01/31/2019"/>	<input type="text" value="02/28/2019"/>			<a href="#">Add Comments</a> <a href="#">+</a> <a href="#">-</a>

[Calculate Duration](#)

**Timesheet**

To the best of my knowledge and belief, the information submitted is accurate and in full compliance with legal and CSU policy requirements.

[Submit](#)

**Navigation:** [Main Menu](#) > [Self Service](#) > [Time Reporting](#) > [Employee Balance Inquiry](#)

- Monthly ending balances are recorded in “Employee Balance Inquiry”
- Retroactive manual adjustments are displayed

Favorites ▾ Main Menu ▾ > Self Service ▾ > Time Reporting ▾ > Employee Balance Inquiry

**CAL STATE LA**

Employee Balance Inquiry

Employee Name  
00000000

**Last Finalized Balances**

Name	Payroll Status	Empl ID	Empl Rcd Nbr	Department	Union Code	Last Finalized Period	Balances as of Date	Sick Balance	Vacation Balance	Personal Holiday Details Available
1	Active	00000000	0	000000	E00	2019-01	01/31/2019	00.000	000.000	1

**Graduated Vacation Chart**

**Verify with your department what your department practice is.**

# Time and Labor

Visit [my.calstatela.edu](http://my.calstatela.edu) to access the HRM self-service menu to report your attendance as an hourly employee or additional hours. Verify with your department what your department practice is.

**Navigation:** [Main Menu](#) > [Self Service](#) > [Time Reporting](#) > [Report Time](#) > [Timesheet](#)

- **Hourly employee**
  - Hourly attendance (regular hours)
  - Additional Hours
- **Monthly Employees**
  - Additional Hours

## Types of Payable Hours

- Regular
- Overtime
- Shift Differential
- Holiday Credit

Navigate from the “Main Menu” to the “Timesheet” page

The screenshot shows the CAL STATE LA Timesheet page. At the top, there are navigation links: Favorites, Main Menu, Self Service, Time Reporting, Report Time, and Timesheet. The page title is "Timesheet". It displays employee information: Employee Name, Employee ID (00000000), Job Title, and Employee Record Number (0). Below this, there are buttons for "Select for Instructions" and "Reported Time Status - select to hide". The main area features a grid for entering hours worked, with columns for Day (Tue 1/01 to Mon 1/07), Total, Time Reporting Code, Taskgroup, and Override Rate. There are three rows of this grid. Below the grid is a summary table for "Reported Time Status" with columns for Date, Status, Total Time Reporting Code, and Comments. The table shows a single entry for 0.000000. At the bottom, there are buttons for "Submit", "Punch Timesheet", "Return to Select Job", "Self Service", and "Time Reporting".

Visit our website at: [www.calstatela.edu/hrm/payroll](http://www.calstatela.edu/hrm/payroll)

- a) Payroll Home Page
- b) Absence Management – guides and information
- c) Time & Labor – guides and information
- d) Employee Information
  - Payroll Calendars
  - Pay Schedules
  - Holiday Calendars
  - Direct Deposit Schedules
- e) Forms
- f) Payroll Staff

**Human Resources Management**

**Payroll**

Administration Building, Room 601  
Monday - Friday from 8 a.m. to 5 p.m.  
Phone (323) 343-3680 | Fax (323) 343-6477

**How To:**

- How to Cancel Your Charitable Contributions (PDF)
- Payroll Personnel