



Human Resources and Employee Development Request for Extra Compensation for Faculty & Exempt Staff

(Must be submitted and approved prior to service being performed)

Date submitted _____

Employee's name _____

Last 4 digits of employee's SS# _____

Home department information

Employee's title _____

Employee's department _____

Employee's school/college/division _____

Requesting department* information

Requesting department _____

School/college/division _____

Funding source for extra compensation _____

Funding source account number _____

Title of program or service function _____

* It is the responsibility of the requesting department to notify the employee's home department of this extra compensation agreement

No. of hours this request _____

Dates from / to _____

Amount _____

I will perform the duties as described at right. The number of hours above reflect the work time required for the services to be performed outside my normal work day or while I am on annual leave.

Please provide a brief description of work to be performed and explain why this additional compensation is necessary:

Employee signature (required) _____ Date _____

Extra Compensation for Faculty & Exempt Staff

In accordance with Board of Regents policy, extra compensation may be paid for participating in appropriate University instructional, research, or service activities when all four of the following conditions are met:

- The work is carried in addition to a normal work load
- No qualified person is available to carry the work as part of his/her normal load
- The work produces sufficient income to be self-supporting
- The additional duties are not so heavy as to interfere with the performance of regular duties

When extra compensation is paid, it shall be no greater than compensation paid for performance of the employee's normal duties. **Prior** to scheduling work for which extra compensation could possibly be paid to a University employee, **approval must be obtained in writing** by completing and submitting this "Request for Extra Compensation" form.

Approved by:

Home Department Head _____ Date _____

Requesting Department Head _____ Date _____

Requesting Dean/Director _____ Date _____

Requesting VP or President _____ Date _____

Human Resources _____ Date _____