



Supplemental Pay Request Form

Complete the entire form. Incomplete forms will not be processed.

In accordance with University Policy 501.16, Supplemental Pay must be approved in advance of the initiation of the Activity. Please review the Policy for additional information.

I. EMPLOYEE INFORMATION

Employee Name		Department	
Employee ID		Position #	
Employee Title		Supervisor Name	
Contract Period		Base Salary	
External Sponsor Name		Sponsor Type	
Activity Date(s)		Proposed Budget	

II. SUPPLEMENTAL PAY INFORMATION

☐ New Request

☐ Continuing Request

Is the employee currently receiving supplemental pay?

☐ Yes

☐ No

If yes, provide the following:

Fund Code	Org Code	Account Code	\$ Amount	PI (if applicable)

Total Amount of Supplemental Pay: \$ _____
Fringe: \$ _____

III. SUPPLEMENTAL PAY TYPE

A. University Funded Activity

- ☐ Instructional Activity
- ☐ Internal Grant
- ☐ Administrative Duties (less than one year)
- ☐ One Time Special Payments

B. Externally Sponsored Activity

- ☐ Government Sponsored Activity Outside the Contract Period
- ☐ Government Sponsored Activity During the Contract Period
- ☐ Intra-University Consulting (requires an exception)
- ☐ Other Externally Funded Activities

IV. JUSTIFICATION

A. Detailed description of the proposed activity.

B. Describe the relationship of the proposed Activity to the employee's normal job duties.

C. Explain how the Activity will/will not interfere with the employee's current duties and provide details on any approved external professional activities.

V. FACULTY REQUESTS ONLY

A. The number of credit hours the faculty member is to teach during the period of the Activity for which Supplemental Pay is being requested. _____

B. Base Salary Calculation and Supplemental Pay (33% limit out of contract period and 20% limit within contract period)

Base Salary Amount \$ _____

33% \$ _____

Requested Amount \$ _____

C. RELEASE TIME

☐ Yes

☐ No

If yes, please provide details of release time.

VI. REQUIRED APPROVALS

A. University Funded Activities

Chair or Unit Head	
Dean (Faculty)	
Provost (Faculty)	
Vice Chancellor/Athletics	
Office of Human Resources	
Chancellor (SAAO)	

B. Externally Funded Activities

Unit Head	
Dean (Faculty)	
Vice Chancellor	
Contracts and Grants	
Sponsored Programs	
Office of Human Resources	
Chancellor (SAAO)	

Once the externally funded Activity is approved in writing by the sponsor, a Position and Salary Action Request form (PPA) should be submitted to the Office of Human Resources for final review and approval. This form should be attached to the PPA.