

**PAMS Summer Salary/Supplemental Pay Request Form**

Original Request: [ ] Revision No. \_\_\_\_\_

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

Date: \_\_\_\_\_

People Soft ID: \_\_\_\_\_

Dept: \_\_\_\_\_

Please circle: **9 month** or **12 month** appointment

Annual Salary: \_\_\_\_\_

Are you requesting more than 2 months of Summer Salary? \_\_\_\_\_ Monthly Salary: \_\_\_\_\_

- \* I would like to request to be paid from the following grant(s) and/or contract(s) for the time period listed below.
- \* I will not be taking any vacation during this period of time.

|   | Account | Agency | Start Date | End Date | # Months | Amt of Pay | Reviewed by        |
|---|---------|--------|------------|----------|----------|------------|--------------------|
|   |         |        |            |          |          |            | Departmental Tech. |
| 1 |         |        |            |          |          |            |                    |
| 2 |         |        |            |          |          |            |                    |
| 3 |         |        |            |          |          |            |                    |
| 4 |         |        |            |          |          |            |                    |
| 5 |         |        |            |          |          |            |                    |
| 6 |         |        |            |          |          |            |                    |
| 7 |         |        |            |          |          |            |                    |

- \* If you need to make a change to your funding source please notify the College Business Office.
- \*\* Changes to funding sources after payment is discouraged, but can be processed up to 120 days after salary has posted.
- \*\*\* Keep in Mind: July and August Summer Salary Requests will receive retroactive increases based on % of the approved legislative increase. Plan your requests for July and August accordingly.
- \*\*\*\* **NSF-approved budgets will not include, funding for an individual investigator which exceeds two-ninths of the academic year salary. This limit includes summer salary received from all NSF-funded grants (and flow-throughs).**

I understand that I will need to certify in my TEARS report that my effort was consistent to the amount of time that will be charged to indicated sponsored research projects for this period.

\_\_\_\_\_  
Signature Date Principal Investigator Date College Business Office Date

\_\_\_\_\_  
Department Head Date \*Dean Date

**If you have questions concerning this form contact:**

Xiaolin Wang at 513-1000 for 5-Ledger funded summer salary  
Joyce Stevens at 513-2089 for all other funding sources

**FORM DUE TO Business Office on the first working day of the month for which you are requesting summer salary.**