

INSTRUCTIONS FOR COMPLETING THE ADDITIONAL COMPENSATION FOR EARLY RETIREMENT FORM

Complete all sections of the form. **Forms not filled out completely will be returned to the Department.** Refer to PPM 2-67 for additional information.

Prepared By: Please include all the information in this box. If there are any questions or missing information on the Additional Compensation form, this is who will be contacted. Omitting this information will cause delays in processing the form.

Payment:

- A. *Employee Name:* Enter the employee's name.
- B. *Employee's Job Title:* Enter the employee's job title as it appears on the PAN.
- C. *Employee's FTE:* Enter the employee's FTE for all active assignments.
- D. *Department Paying Compensation:* Enter the name of the department initiating the form for payment.
- E. *Org ID:* Enter the department/organization ID number for the department initiating the payment.
- F. *Employee's Home Department:* Enter the name of the employee's home department.
- G. *Org ID:* Enter the department/organization ID number for the employee's home department.
- H. *Employee ID #:* Enter the employee's ID number. (This number must be identical to the number on the PAN.)
- I. *Amount:* Enter the gross amount to be paid. Hours or rates per hour are not appropriate for additional compensation.
- J. *Pay Period Dates:* Enter the starting and ending dates of the pay period for which payment is to be made. Additional compensation may not be paid over more than one pay period.
- K. *Chartfield:* Enter the Chartfield to be charged for these earnings.
 - BU** - Business Unit
 - Org ID** - Organization/Department ID
 - Activity/Project** - Activity or Project Number
 - Account** - Account Number
 - A/U** - Allowable (1), Unallowable (0)
- L. *Reason for Additional Compensation:* The reason for the additional compensation should be explicit and concise. Any unusual circumstances should be fully explained.

Approval:

The approval signatures of the Chair/Department Head with line responsibility over the department paying the additional compensation and the Chair/Department Head of the employee's home department are required. In some cases this may be the same signature. The approval of the Office of Sponsored Projects is required if any portion of the compensation paid to the employee is from Federal grants or contracts. The approval of the Vice President with line responsibility over the employee is required if the additional compensation exceeds \$1000.

