

Truman State University
Payment Request for Additional Assignments

All "additional" assignments should be approved by the President **prior** to the service being performed.

Date _____ Department _____

FUND _____ ORGN _____ ACCT _____ PROG _____ ACTV _____ (if applicable)

Faculty/Staff Name _____

Title _____

Banner ID # _____

Type of Assignment: __ Teaching __ Non-Teaching __ Overload

Position Title _____

Start Date _____ End Date _____

Salary _____

Salary Payment Schedule: _____

Per the Code of Policies, "Employees may not "pyramid" salaries by undertaking extra assignments for additional pay during periods of full-time University employment, unless such assignments are specifically recognized as overloads and approved by the President of the University on a case-by-case basis." Source: Resolution of Truman Board of Governors dated June 27, 1992.

Description of Duties: (Please attach additional documentation)

Department Chair Recommendation _____ Date _____

Dean Recommendation _____ Date _____

Appropriate President's Staff _____ Date _____

Budget Director: Budgeted _____ Not Budgeted _____ Initial _____

President's Approval _____ Date _____

Payment Approved _____ Payment Not Approved _____ Payment Delayed _____

Comments/Additional information needed: _____
