



Office of Sponsored Research Administration

Sponsored Programs Summer Compensation Request Form

Only fill out the fields that are in blue. The other fields are auto calculated.

1. FACULTY INFORMATION:

Employee Name:		Title:
College:		Department
Year:	AY Base Salary*:	Max Summer Compensation:

*If you do not know your Academic Year Base Salary, please contact Human Resources at extension 4194, OSRA does not retain annual salary amounts

2. INSTRUCTION/ADMINISTRATION:

Please indicate any teaching or administrative activities and the total you are to be paid for the summer below.

Instruction/Administration	Amount	Months	% of Time
1.			%
2.			%
3.			%

3. SPONSORED PROGRAMS ACTIVITIES:

Please indicate the sponsored programs activities which you will be involved in during the summer below. Please list the grant title, agency, SSU account number, and total you are to be paid.

** If you do not know the SSU grant account number, please contact Grants & Contracts Accounting at either extension 4049 or 4032

Grant Title	Agency	SSU Account #	Amount	Months	% of Time
1.					%
2.					%
3.					%

Activities Performed	Amount	Months	% of Time
Total Instruction/Administration			%
Total Sponsored Program Activities			%
TOTALS			%

4. APPROVALS

Summer effort is **NOT required to equal 100% (eg: to account for vacation , etc). The maximum summer salary available with teaching, administration and research is the equivalent of **3 months** of your academic year salary. The NSF has a limitation of 2 months' summer salary on NSF funded grants.

Employee:	Date:
PI of Project #1:	Date:
PI of Project #2:	Date:
PI of Project #3:	Date:
Department Chair:	Date: