Staff Teaching Requisition

Full Legal Name _____ KSU ID _____

Home Department _____ Staff Dept ID _____

Semester & Year: (Payment will be issued on the next scheduled payroll following semester end.) _____

HR/Payroll Use Only

Employee ID _____ Pay Group _____ Rec No _____ Control Number _____

If assignment is non-instructional, the additional pay must be paid from the department budget.

Pay Distribution (12 digit)	Class Description	Days (M-W-F)	Time (9:00-10:00)	Credit Hours	Rate Per Hour	Total Pay

Please complete form fully and provide all requested information. Incomplete or incorrect data may result in a delay in payment.

Calculated Total

Justification:

If course is within regular work hours, how has staff member work schedule been adjusted?

Approvals: To avoid a delay in processing, all job/position changes requiring a salary or budget change, including changes in hours or pay rate, must be approved by Budget prior to submission to Human Resources.

Staff Supervisor _____ Signature _____ Date _____

Academic Dept _____ Signature _____ Date _____

Sponsored Programs _____ Signature _____ Date _____

Payment Notification Email: _____

Academic Affairs

Comments: _____

Approved: _____ Date Entered: _____

Human Resources

Comments: _____

Approved: _____ Date Entered: _____

Position Management

Comments: _____

Approved: _____ Date Entered: _____

Reset Form 20160517