Preparation of the additive pay fo

Appropriately completed additive
after the additive pay deadline fo

Incomplete information, or forms

No requests for advances or prep

Field Name

Pay Period ID
Department Name
Department Number (Orgn)
Name (Last Name, First Name)
Banner ID Number
Position Number
Earnings Code
Amount of Payment
Fund Number
Organization Number
Account Number
Detailed Explanation
Approvals and Signatures

General Information

...rm must be done under the standards established by the Additional Compensation for Faculty Policy.

... pay forms will be processed on the pay period indicated on the form, or on the next available pay cycle if the form is received
... the period indicated.

... with missing information and/or approvals, will be returned to the Department Originator and will result in a delay of payment.

... payment will be allowed.

Instructions

Entries for this field should be obtained from the appropriate fiscal year "Payroll Calendar – Text Version", on the payroll website, for the period in which the payment is to be made. The calendars are also available at http://hr.slu.edu/hris_calendar.html.

Type in the Banner Department Name, as assigned in the Banner Finance Module, for the department originating the request.

Type in the Banner Department Number, as assigned in the Banner Finance Module, that corresponds to the above department name.

Name of individual to receive payment should be typed in this field in a Last Name, First Name format. Forms will be returned to the originator if not in this format.

You must type in all nine digits of the individuals banner ID.

Type in the primary position number for the individual who is to receive payment. If this is not known, contact the employee's primary department or payroll services. If the individual to receive payment does not have a primary position number, they may not be currently employed with the University and you should use the following general rule. GENERAL RULE: If the individual has been paid through payroll within the current calendar year, use position number of ONEPAY, if the individual has not been paid through payroll within the current calendar year, contact human resources to see if the individual can be paid as an independent contractor for their services.

The only earnings codes allowed for Additive Pay are listed at the bottom of the Additive Pay Form (CNT, URW, RCG, HON, UMG). If an earnings code other than ones listed on the Additive Pay Form are used, the form will be returned to the originator for reprocessing.

Field should be entered as numeric value with decimal point; field is preformatted to two decimal places WITHOUT DOLLAR SIGN. Amount of payment entered should reflect and support comments provided. For example: If comments indicate that the employee worked three days of on call at 500.00 per on call shift, the amount entered in this column should be 1,500.00.

Fund number should be entered as six digits without any dashes. The field is preformatted to system (no-dash) requirements, fund number must be a currently active Banner Finance Fund.

Field should be entered in the format of one letter at beginning and three digits after the letter, and should correspond (belong to) the Banner fund number being charged.

Account number should be entered as six digits without any dashes. The field is preformatted to system (no-dash) requirements, account number must be a currently active Banner Finance Account and must begin with a "6".

A detailed explanation or comments for the additive pay must be included and support the amount of payment being requested. Additional supporting documentation should be stapled (no paperclips please, unless the form and documents are too thick to be stapled) to the form. Any non-exempt, hourly-paid staff requests must document actual hours worked in a work week, to comply with wage and hour laws.

Must be completed by all required levels before processing will occur, and will include both a signature and legibly printed or typed name of the approver. Forms sent to Payroll Services without all required levels of approval legibly completed, will be returned to the Originator and may postpone payment. Signature expectations are that each subsequent level of approval is approving not only the additive pay compensation, but also that the person approving the form immediately before them is the appropriate level and person who should be authorized to sign the form.