UNIVERSITY OF NEW HAMPSHIRE
REQUEST FOR APPROVAL OF FACULTY SUPPLEMENTAL EFFORT AND PAY

For sponsored programs, attach a completed “UNH Faculty Supplemental Pay Questionnaire” to this form.

Faculty Member’s Name: ________________________________

Home Department and College: ________________________________

Proposed Project Title (Course or Activity): ________________________________

External Sponsor (if any): ________________________________

Proposed Project/Course/Activity Period (Start Date and End Date): __________________ - __________________

Proposed Supplemental Time Commitment During Regular Appointment Period*: _________ days
Proposed Supplemental Time Commitment During Summer Period (AY faculty only): _________ days

Your Institutional Base Salary for Your Regular Appointment Period: $ __________________

Total Supplemental Pay Amount Requested: $ __________________

UNH Proposal ID # or Banner Grant/Fund That Will Fund This Effort: __________________

Briefly define your regular workload (e.g., number of courses taught each semester, research activities, committee work, etc.). AY faculty requesting supplemental pay for effort beyond your full-time USNH summer period duties/responsibilities, should define their full-time summer duties/responsibilities.

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Describe your proposed supplemental activity and explain how it is additional to your full-time USNH-compensated duties and responsibilities. If a Federally-sponsored project is to be charged, you must also address how this effort differs from your regular workload.

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Faculty Member’s Signature     Date

Approval Signatures:

Home Department Head     Date

Dean     Date

Hiring Department (if Different from Home Dept.)     Date

Senior Vice Provost for Research (if a Sponsored Program)     Date

*Regular appointment period is normally either an academic year (AY) or fiscal year (FY)
UNH FACULTY SUPPLEMENTAL PAY QUESTIONNAIRE

Please complete this checklist before applying for supplemental pay on a sponsored project.

Faculty Member’s Name: ____________________________  College/Dept.: ____________________________

A. Federally-Sponsored* Projects

1. Is your proposed work on the project temporary (less than one year)?
   - Yes  ☐  Please proceed to question 2.
   - No  ☐  This effort does not qualify for supplemental pay. Please discuss options with your dean.

2. Could your proposed work on the project be compensated through “buy-out” to release some of your teaching load?
   - Yes  ☐  This effort does not qualify for supplemental pay.
   - No  ☐  Please go to question 3.

3. Could your proposed work be compensated by reducing your time and regular pay on another existing sponsored project?
   - Yes  ☐  This effort does not qualify for supplemental pay.
   - No  ☐  Please go to question 4.

4. Would your proposed work be in addition to your regular workload? (Regular workload normally includes components of teaching, research, and service. If you are unsure about your normal workload, consult your dean.)
   - Yes  ☐  Please go to question 5.
   - No  ☐  This effort does not qualify for supplemental pay on a Federally-sponsored project.

5. Would your proposed work be funded on a project for which the Project Director is from a UNH department other than your home department?
   - Yes  ☐  This effort may qualify for supplemental pay. Please go to B below.
   - No  ☐  Please go to question 6.

If yes is checked, please indicate Project Director’s Name and Department: ____________________________

6. Would your proposed work involve an operation separate or remotely located from your normal work?
   - Yes  ☐  This effort may qualify for supplemental pay. Please go to B below.
   - No  ☐  This effort does not qualify for supplemental pay on a Federally-sponsored project.

B. Other Restrictions for Federally-Sponsored* Projects

If you checked “Yes” to A.4. and A.5. or 6. above, and if your work on the proposed project will meet all of the following 4 conditions, complete the “Request for Supplemental Pay” form for your dean’s approval:

1. Your work on the project and the related supplemental pay are specifically provided for in the sponsored agreement or specifically approved in writing by the sponsor.

2. Your total time to be spent on efforts outside of your normal workload will not exceed the equivalent on average of one day during each five-day work week.

3. The supplemental pay from this project will not be used during your base salary period to pay for work you perform during the summer period, nor to pay for base salary period activities unrelated to the sponsored project. (This applies only to academic year, or AY, faculty.)

4. The supplemental pay from this project during your base salary period (or during the summer period for AY faculty) will be based on and limited to your base salary rate, calculated as a daily rate based on 195 days for AY faculty or for FY faculty, the number of days in the fiscal year (260-262). Sponsor limitations, such as salary caps, will be observed.

*Note that Federal regulations apply to sponsored projects whether the funds are received by UNH directly from the Federal sponsor or through another entity, such as a NH state agency.
C. Non-Federally-Sponsored Projects

1. Is your proposed work on the project temporary (less than one year)?
   - Yes □ Please proceed to question 2.
   - No □ This effort does not qualify for supplemental pay. Please discuss options with your dean.

2. Could your proposed work on the project be compensated through “buy-out” to release some of your teaching load?
   - Yes □ This effort does not qualify for supplemental pay.
   - No □ Please go to question 3.

3. Could your proposed work be compensated by reducing your time and regular pay on another existing sponsored project?
   - Yes □ This effort does not qualify for supplemental pay.
   - No □ This effort may qualify for supplemental pay. Please go to D below.

D. Other Restrictions for Non-Federally-Sponsored Projects

If you checked “no” to question C.3 above and if your work on the proposed project meets all of the following 3 conditions, complete the “Request for Supplemental Pay” form for your dean’s approval:

1. With respect to the sponsor’s allowability of supplemental pay and any limitations on the rate of pay, you will adhere to the sponsor’s published policies and/or the specific sponsored agreement terms governing the sponsored project.

2. Your total time to be spent on efforts outside of your normal workload will not exceed the equivalent on average of one day during each five-day work week.

3. The supplemental pay from this project will not be used during your base salary period to pay for work you perform during the summer period, nor to pay for base salary period activities unrelated to the sponsored project. (This applies only to academic year, or AY, faculty.)

Faculty Member’s Signature: _____________________________

Rev. 1/6/2011