

Request for Approval of Extra Service or Also Receives

Full Approval Required Prior to the Commencement of Work

For SUNY Cortland employees rendering additional service to SUNY Cortland

- Extra Service (services rendered outside current department/position)
 Also Receives (overload or additional duties within current department/position)

SECTION 1: TO BE COMPLETED BY EMPLOYEE & APPROVED BY CURRENT SUPERVISOR

Name: _____ Current Title: _____

Department _____ Current Salary: _____

Description of service to be provided: _____

Service Dates: _____ To: _____

Schedule of Services rendered (days of week; hours of day): _____

(Signature – Chair/Supervisor)

(Date)

SECTION 2: TO BE COMPLETED BY SUPERVISOR OF EXTRA SERVICE or ALSO RECEIVES

Compensation: _____ \$

Amount Represents:
 Biweekly Amount
 Total for Service

Account #: _____

Type of Service:
 Instructional
 Non-Instructional

(Signature – Chair/Supervisor)

(Date)

(Signature – Dean/Next Level Supervisor)

(Date)

(Signature – Vice President)

(Date)

<i>Completed by HR:</i>	
Line #:	_____
Title:	_____
PR Dates:	_____
# pmts:	_____

SECTION 3: ACTION BY CHIEF ADMINISTRATIVE OFFICER

- Approved Disapproved
 Approved with the following limitations: _____

(Signature – President)

(Date)

Section 4: Record Management

1 - Payroll Review by: _____ Date: _____

2 - Budget Review by: _____ Date: _____

Distribution: HR (original)

E-Copy: Employee, Primary Supervisor, ES Supervisor