	al Year 2025 STAFF INSTRU ment Agreements will only be in e (Updated)		-	-	University
Name		PCN and Suffix			
V Number		Exempt Staff	Classifie	ed Staff	
Primary Department		Hiring Department (if different)			
Primary Job Title		Contact			
Attach CV Course(s)					
Begin/end date of class		Number of Credits			
Justification Summar	ize why this request is being made. Atta	ach additional documentation to the	his form as	necessary.	
** Please note that the Departme to the first day of class.**	nt Chair can decide to not run a course o	due to low enrollment. A decisior	n to or to ne	ot cancel a cl	ass will occur prior
For Exempt Staff:		For Classified Staff:			
Payment is processed as an addi	itional per-paycheck payment.	This is a second classified hour the employee must enter hours may result in overtime.			
Payment per Pay Period		Hourly Rate			
Number of Pay Periods		Estimated Total Hours			
Total Payment		Estimated Compensation			
Source Funds			Effectiv	e Date	End Date
				ust align with	the start/end of the
Processing Steps					
Step 1: Hiring Supervisor S				Date:	
Step 2: If grant-funded, ema	ail all pages to <u>osp-cost@uidaho.edu</u>	1			
Grant Funded?	No 🛛 Yes Project Title				
This form documents the University's Sec. J 10d(1) Compensation – Base r remote operation, and the work perfor	compliance with OMB Circular A-21 regulation ates for faculty members: "However, in unusu med by the consultant is in addition to his regu rovided that such consulting arrangements are	al cases where consultation is across lar departmental load, any charges for	department or such work	al lines or invo representing e	lves a separate or extra compensation

Office of Sponsored Programs Approval (if grant-funded)	Date:
Step 3: Dean's Signature	Date:
Step 4: Human Resources Review	Date:
email all pages to <u>hr-classcomp@uidaho.edu</u>	
prior to Provost, VP or President Signature	
Step 5: Provost's Approval*	Date:
HR routes (Provost's Office returns to HR)	

After Provost's Office approval, the form is returned to Human Resources and then routed to the unit for employee signature

Contingencies – if applicable:				
Contingencies (HR to add):	🗌 none	yes (Include all applicable contingencies from prior agreement)		

Note to Classified Staff: If you have previously elected compensatory time in lieu of overtime pay, this appointment will reverse that selection and any overtime earned the remainder of this calendar year will be paid as overtime as it is earned.

Terms of this Agreement:

This Agreement constitutes the entire agreement between the Parties with respect to the subject matter of this Agreement; it supersedes all prior negotiations, agreements, representations and understandings with respect thereto. This Agreement may only be amended by a written document signed by the Parties.

This Agreement shall be construed and enforced in accordance with the laws of the State of Idaho, without regard to the conflict of laws rules. Any action brought under this Agreement shall be brought within a court of competent jurisdiction in the County of Latah, State of Idaho. If any part of this Agreement is held unenforceable by a court of competent jurisdiction, then such provision will be modified to reflect the Parties' intention, and all remaining provisions of this Agreement shall remain in full force and effect.

This Agreement will be effective as of the last date of signature by a party to this agreement and will remain in effect until further notice; this Agreement may be terminated by either party with 30 days' notice. Termination of this Agreement shall not affect the rights granted by one party to the other prior to termination. If the Course Author fails to submit course materials, University reserves the right to cancel or renegotiate this Agreement.

Step 6: Employee Acknowledgement:

I agree to the change in my pay detailed in this document. I also agree to all the terms and conditions of this contract and to the payment method set forth.

Employee Signature

Date

Step 7: Return employee signed form (all pages) to hr-classcomp@uidaho.edu

Step 8: HR Finalizes Documents	Date
and distributes fully executed copies to	
processing offices	

Step 9: Unit applies EPAF

*****OFFICIAL USE BY HUMAN RESOURCES *****					
EPAF PROCESSING INSTRUCTIONS:	EFFECTIVE DATE:		TERMINATION DATE:		
EXEMPT: Use PCN 009024.01 E4110 EPAF Category GOATCE (original) EPAF Category GRATCE (repeat) Classified: Use PCN 009023.01 E4110 EPAF Category GOATCC (original) EPAF Category GRATCC (repeat)					