



## FACULTY TEMPORARY CHANGE OR SUPPLEMENTAL COMPENSATION FORM

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### Hiring Department Information (should be form initiator):

Hiring Department:		Unit/College:	
Hiring Contact Person:		Email:	
Hiring Unit Fiscal Officer:		Email:	

### Appointee Information:

Name of Appointee:		V Number:	
Faculty Type:	Active Administrative Appointment:	Yes	No
Home Department:	Home Unit/College:		
Current FTE:	Current Annual Salary:	Current Stipend (if applicable):	\$ _____ % _____
Contract Type:	Academic Year – Standard Pay <input type="checkbox"/>	Academic Year – Deferred Pay <input type="checkbox"/>	Fiscal Year <input type="checkbox"/>

### Temporary Pay Change Request Details:

Request Type	Amount	Begin Date	End Date
Additional Compensation:			
Temporary Salary Increase:			
Temporary Salary Decrease:			
Temporary FTE Increase:	Requested FTE:		
Temporary FTE Decrease:	Requested FTE:		
Unit Pay for Course Development:			
Ad. Comp. for dual credit			
Unit Pay for Low FTE Instruction:			
Sabbatical Supplemental Pay			
Other:			

### Funding Source(s):

Grants/Sponsored Project <input type="checkbox"/>	Gen Ed <input type="checkbox"/>	Student Fees <input type="checkbox"/>	Other <input type="checkbox"/>
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### Appointment Contingencies if applicable:

<b>Appointee Initials</b>	<p><b>For course development</b>, payment will be made to the author after full and satisfactory completion of the work in one lump sum. One hundred percent (100%) of the course must be developed, approved for publication and ready to either post online or teach in the classroom in order to receive payment. The university has sole discretion on whether the work is completed satisfactorily and on time. The university has no obligation to pay for partial completion of the course.</p>
<b>Appointee Initials</b>	<p><b>For dual credit</b>, faculty serving as the liaison for nine (9) or less teachers, payment will be made to the liaison after full and satisfactory completion of the work in one lump sum. The following responsibilities and expectations must be one hundred percent (100%) completed by the faculty liaison in order to receive payment. The university has sole discretion on whether the work is completed satisfactorily and on time. The time of instruction is 18 weeks. Yearlong courses begin in September and end in June for a total of 39 weeks.</p> <ol style="list-style-type: none"> <li>1. Review high school teaching partner applications,</li> <li>2. Create study plans with high school teaching partners, as necessary,</li> <li>3. Facilitate new teaching partner discipline-specific training for approved teaching partners prior to the start of the course,</li> <li>4. Provide teaching partners with U of I discipline-specific course syllabus, rubrics, sample exams, and other course materials prior to the start of the course,</li> <li>5. Review teaching partner Dual Credit Program-provided syllabus template with high school teaching partners,</li> <li>6. Provide guidance concerning the grading policies of the department,</li> <li>7. Provide one U of I sample rubric or one ungraded assessment template (exam or essay) and equivalent high school sample rubric or one ungraded assessment template (exam or essay) per course per year to the Dual Credit Office prior to the June 30 deadline,</li> <li>8. Schedule a classroom visit with teaching partner(s) during the first semester of the course offering. Following the initial visit, a classroom visit must be completed once every other academic year,</li> <li>9. Introduce teaching partners to U of I's culture including mission, vision, and values and facilitate development by networking, sharing resources, and providing positive and constructive feedback on professional development issues,</li> <li>10. Facilitate and/or ensure recommended eight hours professional development per academic year for teaching partners which can be completed in one session or multiple sessions (July through June),</li> <li>11. Attend faculty liaison orientation and Dual Credit Program-led professional development,</li> <li>12. Faculty liaisons will extend adherence to guidelines outlined in Faculty Staff Handbook (FSH) where it concerns their responsibilities and obligations in collaboration with the Dual Credit Program.</li> </ol>
<b>Appointee Initials</b>	<p><b>Other contingency (please describe):</b></p>

**Description of Request and Justification for Change:**

Summarize the need for this temporary request and document the rationale for the change type selected above. Attach additional documentation to this form as necessary. If additional compensation is for instructional overload, provide specifics of the faculty primary assignment and the additional course(s) obligation as evidence of overload. If this is for course development, please list the class or classes that are being developed. If using grant funds, please identify the project title and explain the scope of work. If a calculation was used to determine the payout amount, please include this calculation in the following field.

**Subject to approval, signatories of this document agree to the following terms:**

This change form is subject to approval by the Provost and Executive Vice President or designee. **Work cannot commence prior to final approval and approval is not guaranteed.** If this form is approved after the Tuesday EPAF deadline has passed, EPAF must be submitted during the next EPAF cycle.

Hiring Dept Supervisor	Date	Primary Department Supervisor <i>(if different than hiring)</i>	Date
Hiring College/Unit Dean	Date	Primary College/Unit Dean <i>(if different than hiring)</i>	Date
Primary Principal Investigator <i>(if on grant funding)</i>	Date	Grant funds only: OSP Approval <i>(if on grant funding)</i>	Date
Appointee/Faculty Member	Date	Provost/EVP or Designee	Date

**PROCESSING STEPS:** The Office of the Provost and Executive Vice President will route the approved form to [budget@uidaho.edu](mailto:budget@uidaho.edu), [hrepaf@uidaho.edu](mailto:hrepaf@uidaho.edu), appointee, hiring contact, and college/unit fiscal officer.

Provost Office EPAF Instructions:	PCN/Suffix/Job Change Code	Original	Repeat
Additional Compensation	9025.01	GOADCP	GRADCP
Mid-Year Faculty Change	9027.01	GODPCH	GRDPCH
Sabbatical Supplemental Pay	9027.01 / CSATM	GODPCH	GRDPCH
Unit Pay - Course Development	XX9715	IHUPOA	IHUPAP
Unit Pay - Instructional	XX9718 (T5)	IHUPOA	IHUPAP
4105 Ecode	4107 Ecode	4110 Ecode	4103 Ecode
Other notes and instructions:			