Pittsburg State University

UNCLASSIFIED Additional Teaching Compensation (ATC)

This form is for additional teaching compensation for courses for credit.

For questions, please contact the Provost Office, Bryronni Ferguson X6170 bferguson@pittstate.edu

I. Employee Information								
Tenured/Tenure Earning Faculty: Non-Tenure Faculty: Professional Staff:								
Nam								
PSU ID #:								
Title/Rank:								
	e Dept:							
Divis	ion:							
				C 0 1 1111				
	10.11.	•			al Teaching Com			
		pointment is for an academic as				pointea to a te	acning pos	sition, a
	Jacuity cr	edentials form must be attache	a or on jile v	vitn institu	tional Equity.			
	Is the	re a faculty credential on file?	Vac	N	ο N/Λ			
		uested ATC are required to be liste				aless otherwise a	nnroved hv	the
	Provo	·	.u on the <u>cou</u>	roc vacancy	<u> </u>		pp.o.ca zy	
	Has t	nis been posted?Yes	No (if no ST	OP and con	ntact Provost Offic	ce)NA		
								=
	Course I	lame	Course ID	C	redit Hours	Enrollment	Max	
							Seats	
								_
								_
		ce is to be performed – ATC can	not be paid			of service		
	Date:				End Date:			
Justif	fication for	the additional teaching compe	nsation. (Wi	ho, What, \	When, Where, Wi	ny)		
		III DECLII AD FACI	IITV I OAD /	Complete	if coation I is man	lead "faculty"\		
III. REGULAR FACULTY LOAD (Complete if section I is marked "faculty") SKIP IF DEPARTMENT SUBMITTED THE COURSE FACULTY LOAD IN ADVANCE TO PROVOST								
	JINI	Course Name	T	Course ID	Credit	Number of	Max	
		course Name		Course ID	Hours	Students	Seats	
					Tiodis	Enrolled	Scats	
	_					Linonea		
	-							
	_							
	 							
	-							

IV. Previously Approved/In Process ATC and/or EDC's (For Current FY/AY)					
	Course Name/Extra Duty	Term/Dates	Compensation Amount		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		

V. Pay Amount & Funding							
Is the ATC to be paid in one lump sum or split over multiple pay dates?							
	One Lump Sum	Multiple	Multiple pay dates (list dates below)				
Fund	Cost Center	Cost Center Na	ime	*Pay Date	# of pay	Amount of	
				(Start and End	Dates	Bi-Weekly	
				Date)		Gross**	
Total of Additional Compensation:							

VI. Approvals						
Employee's Signature:			Date:			
Supervisor of Employee: (Unit in which employee resides):			Date:			
Approvals below based on unit responsible for	funding:					
Chair/School Director:			Date:			
College- Finance and Budget Manager*:			Date:			
Dean:			Date:			
Provost Office Budget*:			Date:			
Provost:			Date:			
Other Administrative Approvals:						
Office of Research & Sponsored Programs (only if Grant Funds are being used)			Date:			
Budget (required):			Date:			
VP Business, Facilities & Finance (required):			Date:			

Contact Information for Person Completing ATC Request					
Name:		Phone Ext:			

^{*}Final pay dates will be determined based on date the final document is received by HRS. Number of pay dates could change to fit within the start and end date listed.

^{**}In addition to Gross, Fringe Benefits will be charged to the unit. Contact Budget/HRS if you need assistance in determining the Gross amount to be paid.

^{*}College Finance & Budget representative signature varies by college (confirm with Dean who should sign)