

**Additional Compensation Form for  
Professional Staff**

University of Massachusetts · Amherst

EmplID# \_\_\_\_\_

Rcd# \_\_\_\_\_

The Additional Compensation Form is used to grant **written approval** for participation in and payment of additional compensation for professional staff. The Additional Compensation Policy and Guidelines appear on the reverse side of this form. Submit the completed form to the Division of Human Resources not less than **ten (10) business days before the start of such services**.

**Section A: To be completed by the Funding Department**

Employee Name \_\_\_\_\_  
(Last, First)

Business Title \_\_\_\_\_

Home Dept Name \_\_\_\_\_ Funding Dept Name \_\_\_\_\_

☐ Continuing Education Program ☐ Public Service ☐ Benefit to University

Appointment Period: From \_\_\_\_\_ To \_\_\_\_\_

Recommended Bi-Weekly Ad Comp payment: \$ \_\_\_\_\_ X \_\_\_\_\_ = Total Recommended Ad Comp \$ \_\_\_\_\_  
# of bi-weekly  
payperiods

Current Annual Salary (FTE) \$ \_\_\_\_\_ 12% of Current Annual Salary (FTE) : \_\_\_\_\_

Funding:

HR Combo Code \_\_\_\_\_ % Budget Amt \$ \_\_\_\_\_ Funding End Date \_\_\_\_\_  
mmddyy

Fund \_\_\_\_\_ Fund Dept ID \_\_\_\_\_ Project/Grant \_\_\_\_\_

(PS) Account \_\_\_\_\_ PI Signature \_\_\_\_\_

Description of Services: \_\_\_\_\_

Approved by: \_\_\_\_\_

\_\_\_\_\_  
Department Head/Director Date Dean or Provost/Vice-Chancellor Date

Prepared by \_\_\_\_\_ Email \_\_\_\_\_ Tel# \_\_\_\_\_ Date \_\_\_\_\_

**SECTION B: To be completed by the Home Department**

1. Will the additional duties be performed outside of normally scheduled working hours? ☐ Yes ☐ No

2. If not, will the staff member be granted the use of vacation time, personal time or leave without pay? ☐ Yes ☐ No

Additional Compensation for this employee is: ☐ APPROVED ☐ DISAPPROVED

\_\_\_\_\_  
Department Head/Director Date Dean or Provost/Vice-Chancellor Date

**SECTION C: To be completed by Human Resources and Controller's Office**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Manager of Total Compensation

Controller's Use	HR Combo Code	PS Acct	(original) Funding Eff Dt	Funding Begin Date	Budget Amt \$	Initials	Date
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Distribution: Payroll (Original), Controller, Funding Dept, Employee, Home Dept.

Rev. April 2009

## Additional Compensation Policy for Professional Staff

A. In recognition of the significant levels of education and professional experience of the professional staff at the University, and to provide the University with a highly professional pool of resources for additional duties as a **benefit** to the University or as a **service** to citizens of the state and the nation, it is the policy of the University to permit compensation to professional staff for certain additional professional services within the following principles:

- (1) Each member of the professional staff is under obligation to render to the University and to his/her department/unit the highest level of service of which he/she is capable. No additional services shall be undertaken, with or without compensation, that interfere with the discharge of assigned duties and responsibilities.
- (2) When additional compensation is to be paid by grant or trust monies, such funds must be budgeted and encumbered in advance, and all payments must conform to any regulation governing the grant or trust fund.
- (3) When additional compensation is to be paid by state monies, state subsidiary account AA will be the only acceptable payment source, subject to the regulations established by the state, University, and department/unit.
- (4) Should the use of University facilities, equipment, or supplies be required, approval must be obtained in advance from the appropriate department Head, Director, Dean, or Vice Chancellor. A reasonable fee may be levied by the University for use of such facilities, equipment, and supplies, and shall be determined by the Treasurer of the University upon recommendation of the respective Department Head, Director, Dean or Vice Chancellor.
- (5) All requests for participation in and payment of additional compensation are subject to the prior written approval of the designated campus officer(s) responsible for determining appropriateness and eligibility.

B. Members of the professional staff are permitted to participate with or without compensation, in

- (1) all authorized programs administered by the Division of Continuing Education,
- (2) programs that provide new processes for development by Massachusetts industrial and agricultural interests, programs requiring the performance of a service role to and for the citizens by undertaking programs from agencies of the state and federal government, foundations, or other sources for the use and benefit of all,
- (3) programs or services sponsored by a University unit, which promote personal or professional growth and enrichment and provide benefit to the University, provided such participation conforms to the following stated principles:
  - (a) Professional staff members **may not participate in any approved program without prior written approval** from their Department Head, Director, Dean, or Vice Chancellor.
  - (b) Requests for participation in programs under Items 2 and 3 above must be accompanied by a brief description of the service to be provided, the unit to be served, and its potential benefit to the University **prior to any commitment being made**.
  - (c) All such services and participation shall be in addition to and exclusive of the regularly assigned duties and responsibilities normally performed by the professional staff member, so agreed to by the University and staff member and as reflected in the current job description of record.

C. Total compensation for all such services with the exception of compensation paid to Athletic Coaches engaged in Summer Sports Programs **may not exceed, in a given calendar year, an amount greater than twelve percent** of the staff member's then current base annual salary, and may be administered at rates established by existing compensation schedules such as that, for instance, used by the Division of Continuing Education, or at rates based on existing compensation for comparable service and required expertise, provided it can be determined that such additional duties do not fall within the scope of duties and responsibilities assigned said staff member in his/her official job description. Should it be determined that the additional services fall within the scope of duties and responsibilities assigned in the official job description, no additional compensation shall be paid.

D. No professional staff member may receive additional compensation if:

- (1) The additional duties would bring him/her into conflict with Chapter 268A of the Massachusetts General Laws, or the interests of the University of Massachusetts, or the interests of the Commonwealth of Massachusetts.
- (2) The additional duties occur in what would be defined and/or perceived by the supervisor as falling within the normally scheduled working hours, unless the staff member requests and is granted the use of personal time, vacation time, or leave without pay. The use of such vacation time, personal time, or leave without pay may be denied if, in the opinion of the appointing authority, it is impossible or impractical because of work schedules or other contingencies.

### Guidelines for Paying Additional Compensation

Periods of Service: A staff member who will be paid for additional compensation services, shall render these services (1) outside his or her normal working hours, or (2) while he or she is on vacation, or (3) while he or she is on Leave without Pay from the University.

Source of Funds: Additional compensation can be paid from state AA monies, trust funds, grants or contracts. The availability of funds will be verified and approved by the Controller's Office.

Approval Process: The Additional Compensation form must first be completed and signed by the department that is funding the professional staff person's services (**Section A** of the form). The form must also be signed by the Principal Investigator (when applicable) and the Principal Investigator's supervisor (not less than the Department Head). Next, the staff person's home department fills out and signs **Section B**. Once the form has been completed and approved, it must be submitted to the Division of Human Resources for approval by the Manager of Classification & Compensation and for payroll processing.