

Note: A copy of this memo is to be completed and attached to all HRP-3 forms for *staff exempt and faculty members* receiving additional pay who are paid on an academic year basis. (i.e., Directors, Adjunct Instructors, Research Associates, etc.--even if they are on "special appointments" and the PAF shows that they are working "0" percent full-time.)

MEMORANDUM

TO: Director of Payrolls
The University of Tennessee

FROM: Employee's Supervisor

RE: Additional Pay

DATE: _____

Employees Who Receive Annual Leave Benefits

This is to certify that _____ performed the following
(employee's name)
duties _____

for additional pay from _____ to _____. They
(date) (date)

- were performed:
- (a) entirely outside of the University's normal work week.
 - (b) during the normal work week when the employee was on annual leave.

Employees Who Do Not Receive Annual Leave Benefits

This is to certify that the additional pay requested for _____
(employee's name)
is for service to the university from _____ to _____.
(date) (date)

- which was performed:
- (a) as a function of the person's term position which does not accrue annual leave.
 - (b) in addition to the person's normal duties as a term employee who does not accrue annual leave.

Supervisor's Signature

Employee's Signature

Employee's Home Office/Dept.