

INSTRUCTIONS FOR COMPLETING THE PAYMENT OF AUXILIARY EARNINGS FOR EARLY RETIREMENT INCENTIVE PROGRAM PARTICIPANTS FORM

Complete all sections of the form. **Forms not filled out completely will be returned to the Department.**

Prepared By: Please include all the information in this box. If there are any questions or missing information on the Auxiliary Earnings form, this is who will be contacted. Omitting this information will cause delays in processing the form.

Payment:

- A. *Employee Name:* Enter the employee's name.
- B. *Employee Citizenship:* Select whether the employee is a U.S. Citizen or not. If they are not a Citizen, enter the country of citizenship.
- C. *Employee's Job Title:* Select or enter the employee's job title as it appears on the PAN.
- D. *Department Paying ERIP Incentive:* Enter the name of the department initiating the form for payment.
- E. *Org ID:* Enter the department/organization ID number for the department initiating the payment.
- F. *Department Paying auxiliary earnings:* Enter the name of the department paying the employee's auxiliary earnings.
- G. *Org ID:* Enter the department/organization ID number for the department paying auxiliary earnings.
- H. *Employee ID #:* Enter the employee's ID number. (This number must be identical to the number on the PAN.)
- I. *Amount:* Enter the gross amount to be paid. Hours or rates per hour are not appropriate for auxiliary earnings but should be calculated and indicated in the "Reasons..." description.
- J. *Pay Period Dates:* Enter the starting and ending dates of the pay period for which payment is to be made.
- K. *Chartfield:* Enter the Chartfield to be charged for these earnings.
 - BU** - Business Unit
 - Org ID** - Organization/Department ID
 - Activity/Project** - Activity or Project Number
 - Account** - 55700
 - A/U** - Allowable (1), Unallowable (0)
- .
- .
- M. *Reason for auxiliary earnings:* The reason for the auxiliary earnings should be explicit and concise. Any unusual circumstances should be fully explained.

Approval:

The approval signatures of the Chair/Department Head, Dean/Director and Vice President with line responsibility over the department paying the auxiliary earnings and the Human Resources Representative who maintains the Early Retirement Incentive Program for the participant are required.

University of Utah Payroll Department
Payment of Auxiliary Earnings
for Early Retirement Incentive Program Participants

Prepared By: _____	Email: _____
Phone: _____	Date: _____

Auxiliary earnings are restricted to authorized University retirees participating on the Early Retirement Incentive Program (ERIP). Justification to support the auxiliary earnings must be complete and the **required approvals must be obtained before this form will be processed for payment**. Payment will be processed as a separate check and filed back with regular payroll for the department paying the ERIP incentive.

Payment of auxiliary earnings is restricted to ERIP participants only for the payment of services performed that arise infrequently and are temporary in nature. This process will allow departments to retain ERIP participants for University services, while active on the ERIP. Upon full retirement, departments will no longer use this form for temporary compensation of retirees, but will process a regular PAN.

This form will authorize payment to: Employee's Name _____

Is Employee a U.S. Citizen or Greencard Holder?
Yes ☐ No ☐ If no, country of citizenship: _____

Employee Job Title: Faculty ☐ Staff ERIP ☐ Auxiliary Job Title: _____

Department Paying **ERIP Incentive**: _____ Org ID: _____

Department Paying **auxiliary earnings**: _____ Org ID: _____

PLEASE SEE INSTRUCTIONS FOR COMPLETION OF THE FOLLOWING SECTIONS

Payment: Payment should be requested after work is performed. (DO NOT FILL IN SHADED AREAS.)

Employee ID #	Record #	Earnings Code	Additional Sequence	Amount
		ERI		

Pay Period Dates		Chartfield				
Start	End	Bu (2)	Org ID (5)	Activity/Project (8)	Account (5)	A/U (1)
					55700	

MANDATORY

Reason for auxiliary earnings (Please provide details):

APPROVALS:

Human Resources Representative Date

Chair/Department Head Paying Auxiliary Earnings Signature

Cognizant Dean/Director Date

Cognizant Vice President Date