

# Summer Salary Request

Revised 5/8/20



This form is to be used by Texas A&M University faculty members to request approval of summer salary support that will result in payment of 12 months of salary for this fiscal year. **Forms are due by June 1, 2020.**

Faculty Member Name: \_\_\_\_\_ Faculty Member UIN: \_\_\_\_\_

Department: \_\_\_\_\_ College: \_\_\_\_\_

## Request for Summer Salary - for period not covered by academic appointment

I hold a \_\_\_\_\_ academic appointment.

I request summer salary from \_\_\_\_\_ to \_\_\_\_\_, which will result in payment of 12 months of salary with no change in my academic appointment.

- All or a portion of the summer salary will be sourced on non-sponsored funds. Sponsored funds are held in 4xxxxx accounts. Sign attestation below and obtain dean's signature.
- All of the summer salary will be sourced on sponsored research funds. Sponsored funds are held in 4xxxxx accounts. Sign attestation below and obtain signatures from your dean and the Vice President for Research.

## Summer Pay Details

Period / Month		Fund Source	% Effort	Comments: for grants/contracts, indicate funding agency, e.g., NIH, NSF, etc.
From	To	##-#####-#####		

- List of additional funding source(s) attached.

### Attestation

I certify that to date during this fiscal year, I have only taken off on university holidays and inter-semester breaks. It is my intention that during the remainder of the fiscal year, I will only take time off on university holidays and inter-semester breaks. In the event that I take any other time off during the remainder of the fiscal year, I will notify my department head and I acknowledge that my summer salary may be adjusted. I understand that my employment for additional months during the summer to teach or do research does not change my appointment to a 12-month basis and that I am not eligible for paid vacation time.

\_\_\_\_\_  
Faculty Member Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head Name

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean Name

\_\_\_\_\_  
Dean Signature

\_\_\_\_\_  
Date

VPR signature required when summer funding is fully sourced on sponsored research funds.

**Dr. Mark A. Barteau**

\_\_\_\_\_  
Vice President for Research Name

\_\_\_\_\_  
Vice President for Research Signature

\_\_\_\_\_  
Date