



Extra Service Pay
CORRECTION

Office of Human Resources
Personnel Action Request

ID Number: T
Last Name: _____
First Name: _____
Middle: _____
Department: _____
Present Job Title: _____

*Annual Salary: _____
Previous ESP: _____
Approved Amounts for Current Fiscal Year:
\$ _____
\$ _____
\$ _____

Date of correction: _____ PeopleAdmin action # of appointment to be corrected: _____

Check one: Non-credit Instruction Credit Instruction Consultant Other

Description of Service:

Services rendered From: _____ To: _____

Total payment amount: _____ Check one: One-time payment (at the end of service period)
 Distributed across service period

Source of funds for extra service payment
Fund _____ Org _____ Acct _____ Program _____
Position number: _____

Special Conditions: (INDICATE REASON FOR CORRECTION - REPLACE VERIFICATION OF ADD. WORK IF NEEDED)

PEOPLEADMIN ROUTING

Requestor to Department Head to Dean to VP to Title III* to Grants* to Budget to Human Resources to President
*optional (for grant-funded positions)

Please print and have the employee sign the Verification of Additional Work form (found on a separate tab in this workbook). Scan and attach that and any additional back-up material (such as a leave request form) as supplemental documentation in PeopleAdmin. *The maximum Extra Service Pay that can be earned in the fiscal year is 20% of the annual salary.

1. Complete form and save to your network folder.
2. Begin new PARF action in PeopleAdmin.
3. Attach completed form to PARF action.
4. Track action to make sure routing does not stall.



**Verification of
Additional Work
CORRECTION**

**Office of Human Resources
Personnel Action Request**

ID Number: T _____
Last Name: _____
First Name: _____
Middle: _____
Department _____
Present Job Title: _____

I, _____, have agreed to perform the following
duties: _____

for (department): _____

in connection with (name of grant or research project): _____

for the agreed upon total amount of: \$ _____. This service will in no way interfere with my regularly
assigned job duties or work schedule at Tennessee State University.

Proposed work schedule: _____

Signature of Employee: _____

Signature of Employee's Supervisor: _____

Signature of Project Manager: _____

Print form for signatures, then scan and attach as supplemental documentation at the time extra-service pay request is submitted via PeopleAdmin.