



**Extra Service Pay**

**Office of Human Resources  
Personnel Action Request**

ID Number: T \_\_\_\_\_

\*Annual Salary: \_\_\_\_\_

Last Name: \_\_\_\_\_

Previous ESP: \_\_\_\_\_

First Name: \_\_\_\_\_

Approved Amounts for Current Fiscal Year:

Middle: \_\_\_\_\_

\$ \_\_\_\_\_

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

\$ \_\_\_\_\_

Present Job Title: \_\_\_\_\_

\$ \_\_\_\_\_

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:

*Authorization for ESP must be documented and approved by the Division Head before services are rendered or work is performed.*

**PEOPLEADMIN ROUTING**

**Requestor to Department Head to Dean to VP to Title III\* to Grants\* to Budget to Human Resources  
\*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 40% of the fiscal year 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**

**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): \_\_\_\_\_

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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: \_\_\_\_\_

*Authorization for ESP must be documented and approved by the Division Head before services are rendered or work is performed*

**Signature of Employee/Date:** \_\_\_\_\_

**Signature of Employee's Supervisor/Date:** \_\_\_\_\_

**Signature of Project Supervisor/Date:** \_\_\_\_\_

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