

One Time Pay Form Instructions

IMPORTANT! READ all instructions THEN use the link at the bottom of the document to request a One Time Pay

For additional guidance see ASU Policy Manual/Supplemental Pay for policies regarding supplement pay to ASU employees [https://policy.appstate.edu/Supplemental Pay](https://policy.appstate.edu/Supplemental_Pay)

It is important that all fields are accurate and complete. Signature lines and email addresses must be correct. Forms with incorrect information, missing or incorrect signatures may be rejected and may result in delay of payment to the individual

If there is a question as to who or what should be entered in a field contact Anni Leashomb
leashombam@appstate.edu before you submit the form

You should download a copy of the form prior to sending it for signature. If you discover there is an error on the form you have submitted contact Anni Leashomb as soon as possible

Use only for benefit earning EHRA employees

Deans cannot have supplemental pay of any kind (with the exception of the Dean of Honor's College, Associate Deans and Assistant Deans)

SHRA employees, students and non-benefit earning faculty cannot have a One Time Pay (OTP)

Academic Affairs (AA) processes all OTPs regardless of the division the individual works in. AA tracks supplemental pay for teaching and non-teaching EHRA employees

One Time Pays should be completely approved prior to the work starting

The deadline to have completely approved forms to Payroll is the 8th of the month. Be sure to begin OTPs well ahead of this deadline to allow all parties time to review and approve. **NOTE: Due to the volume, OTPs to be paid in June should be submitted no later than May 14th.**

OTPs are paid on the last working day of the month

Form Fields:

Contract between Appalachian State University:

The name of the department or area contracting with the individual

Full Legal Name:

Do not use nicknames or shortened names. Full name is necessary for reference if there is an error on the BID

Last 4 of SSN:

Needed for Payroll purposes

Banner ID:

Double check the number is complete and correct

Time Sheet Org#:

The department in which the individual normally paid

Current Employee Class:

F1 is for full time or ¾ time benefit earning faculty

2F is for non-teaching EHRA employees

Add F3 for faculty who are in phased retirement (they are considered benefit earning).

Most other employee classes are not eligible for a One Time Pay. Contact Academic Affairs if you have a question about rather an employee is eligible

Date/Time of Work:

This must be completed and in the format of dates

If work is being completed over a period of time, or series of dates, there must be an end date for example June 1, 20xx to present cannot be used

If work is during fall, spring or academic year use the begin and end date of the semester(s)

If the OTP form is for an award use the time period in which the award is given

Location:

Where work is taking place

Please describe services:

Be concise and brief in this description. Provide enough information for those who process the form to know what the work is

If services are for an Overload include the course and section number (*see ASU Policy Manual/Supplemental Pay 4.2.3 regarding overloads*)

If the OTP is an award include the name of the award

Established Position Number:

Established Position Number: If using a state fund and position number (POSN) is known add it to the form. If POSN is not known contact Business Affairs

If using non-state funds replace the first number from the fund code with an F. For example, if the fund number is 523456 the POSN will be F23456

Fund: Org: Account: Program:

Please provide accurate FOAP information. If you are unsure of any of the information to be provided, ask the person in your area overseeing the fund, or contact Business Affairs for state funds, Special Funds for non-state funds.

Payment Date:

The last working day of the month in which work is completed. For example, if work is completed May 2 the pay date will be the last working day of May or **if work is completed May 30 and the last working day is prior to May 30, the pay date is still the last working day of May*

OTP contracts cannot be paid prior to the end of work being completed; be sure the pay date is after the last day of work. Check the *Date/Time of work:* field to be sure you are adding the correct payment date. *See* previous statement above for Date/Time of work field*

If the form is received after the deadline date of the month being paid the OTP will be paid on the last day of work of the following month. For example, if the form is received in Academic Affairs on May 15th, and the pay date is May 30, the OTP will be paid the last working day of June.

SIGNATURES:

Individual: The person providing the services.

Project Director/Supervisor: The person directing or supervising the work being done by the Individual. *If the individual is the PD they may sign as PD*

Chairperson: The individual's chair, director or immediate supervisor of their *current regular ASU position*

If there is no chair in the academic department (e.g., School of Music) then indicate on the signature line *NA No chair in SOM*, add initial and date

Dean: The dean in the academic areas or the director of non-academic areas

The (Academic Affairs Only) line indicates that this is normally used for academic areas housed in colleges or schools. If the individual is NOT from an academic area, Athletics for example, this line does not need to be completed, or may be used if there are additional signatures needed

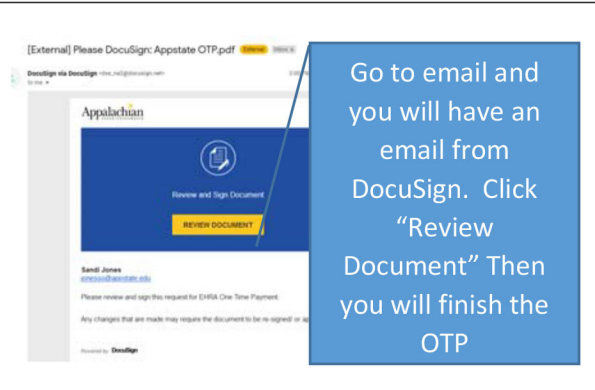
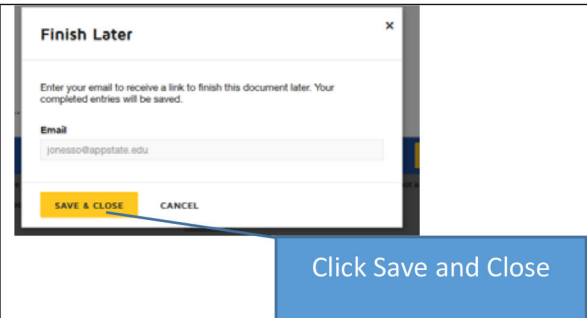
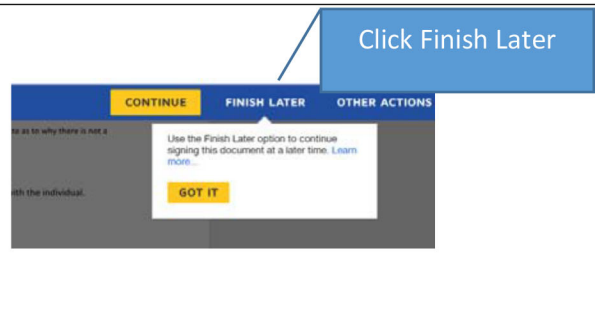
Budget Director or Special Funds Director: Budget Director of the Budget Office for state funds.
Special Funds Director for non-state funds

Academic Affairs: CFO in Academic Affairs or their designee.

Incomplete or incorrect OTPs may be declined and become void. In this case you will be notified that it has been declined, directed to notify all signees, and a new OTP will need to be submitted.

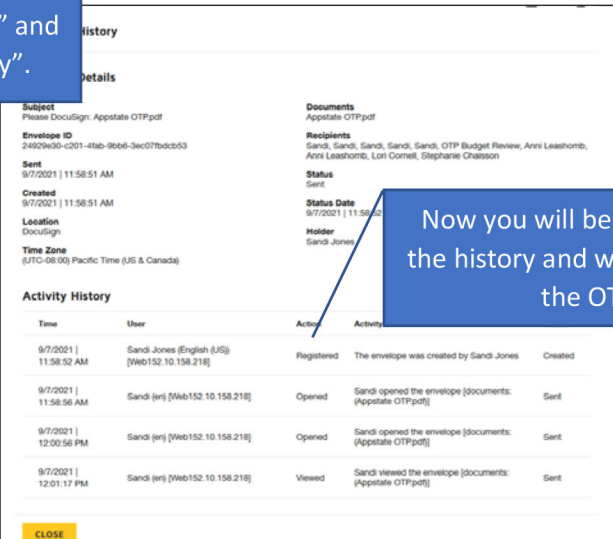
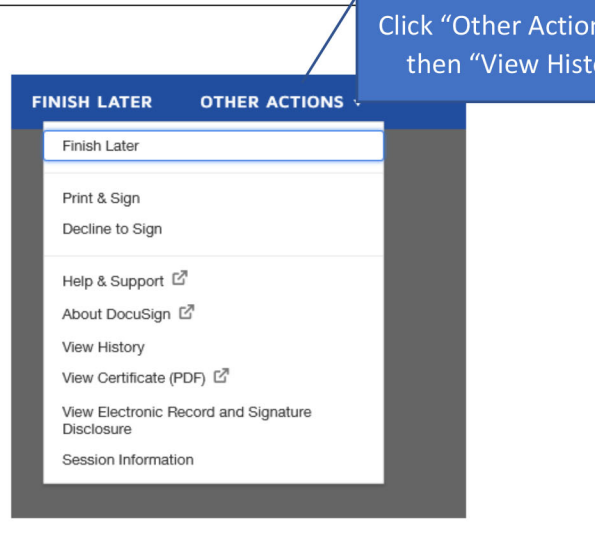
Saving and Tracking Your One Time Pay

Complete the first page of the OTP with Names and Email addresses and then click submit.



When you need to check on the status of the OTP, you will go back to the saved email and click "review Document". You will receive a warning message indicating the link has expired. Select "Send me a New Link". When you receive the new link, click "Review Document".

NOTE: Save this email.



Click here to request a One Time Pay

If the link above does not work copy and paste the address below into your browser

<https://powerforms.docuSign.net/99a4c8e4-b724-4f65-9ed6-a97a63c967b8?env=na2&acct=380775cf-c747-48ec-ba9f-6823795a3f8e&accountId=380775cf-c747-48ec-ba9f-6823795a3f8e>