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|  | **Recommendation for** **Off-Cycle Faculty Bonus Award** |

This form provides a means to justify and seek approval for an off-cycle faculty bonus award in accordance with VCU’s Faculty Bonus Award policy at www.assurance.vcu.edu and the applicable School/Unit Faculty Bonus Award Plan. Off-cycle bonus awards are those not coinciding with the University’s salary administration process for faculty salary increases.

**Note:** Funding for bonus awards must come from personal services’ budget funds and not from operating items, such as equipment, supplies, and travel.

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| **FACULTY NAME (LAST, FIRST, MIDDLE INITIAL)** | | V-ID Number\* | | | **POSITION #** | | | **FACULTY APP’T. TYPE** | |
|  | |  | | |  | | |  | |
| SCHOOL / UNIT | | | | DEPARTMENT | | | | | |
|  | | | |  | | | | | |
| **EFFECTIVE  DATE**\*\* | **CURRENT ANNUAL BASE SALARY** | | **PROPOSED BONUS  AMOUNT** | | | | **BONUS  PERCENT** | | **INDEX CODE** |
|  | $ | | $ | | | | **%** | |  |
| **JUSTIFICATION** (see Faculty Bonus Award Policy and School/Unit Faculty Bonus Award Plan) -– attach additional sheet if necessary | | | | | | | | | |
|  | | | | | | | | | |
| **Approved  Disapproved** | | | | | | | | | |
|  | | | | | | | | | |
| *Printed Name and Signature of* Department Chair or Director | | | | | | Date | | | |
|  | | | | | |  | | | |
| **Approved  Disapproved** | | | | | | | | | |
|  | | | | | | | | | |
| **Funding Approval:** *Printed Name and Signature of Dean’s Level FA* (if applicable) | | | | | | Date | | | |
|  | | | | | |  | | | |
| **Approved  Disapproved** | | | | | | | | | |
|  | | | | | | | | | |
| *Printed Name and Signature of* Dean or Unit Head | | | | | | Date | | | |
|  | | | | | |  | | | |
| **Approved  Disapproved** | | | | | | | | | |
|  | | | | | | | | | |
| *Printed Name and Signature of* Vice President | | | | | | Date | | | |
|  | | | | | |  | | | |
| **Approved  Disapproved** | | | | | | | | | |
|  | | | | | | | | | |
| *Signature of* President | | | | | | Date | | | |
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Faculty bonus award distribution selection:

Cash distribution; or

Deferred (attach completed Salary Reduction Agreement (SRA) available at hr.vcu.edu under “forms.”

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\* Contact the faculty member’s Personnel Administrator for the V-ID number.

\*\* Tax-deferring the bonus depends on the faculty member's previous Tax-Deferred Annuity (TDA) contributions or the timing of the off-cycle bonus.

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| **For Payroll Use Only** | |
| **Initials** | **Date** |
|  |  |
| BON earn code | |