

Faculty Payment Worksheet Date:
Summer School – Year _____

Faculty Name _____ Faculty Salary \$ _____ SS# _____

	Maymester	Thru	First	Second
#1 Class course # external__ state__				
Percentage				
*Amount to be compensated				
Call #				
Course Title				
** Projected # of students enrolled				
Projected CHP				
Account Number				
Account Name				
Role				
Source of funding (e.g. Dean's Office, Gwinnett, In-service)				
#2 Class course # external__ state__				
Percentage				
*Amount to be compensated				
Call #				
Course Title				
** Projected # of students enrolled				
Projected CHP				
Account Number				
Account Name				
Role				
Source of funding (e.g. Dean's Office, Gwinnett, In-service)				
#3 Class course # external__ state__				
Percentage				
*Amount to be compensated				
Call #				
Course Title				
** Projected # of students enrolled				
Projected CHP				
Account Number				
Account Name				
Role				
Source of funding (e.g. Dean's Office, Gwinnett, In-service)				
Other Instructional activity: _____ % of time _____				
Description: _____				

This worksheet is to confirm your summer _____ employment as shown.

This agreement is made expressly contingent upon available funding and subject to the applicable State and Federal laws and to the statutes and regulations of the institution, such as appropriate enrollment, and to the bylaws and policies of the Board of regents.

*The total percentage of compensation during Maymester cannot exceed 11.1% The total compensation for all sessions cannot exceed 33.3%.

**Criteria for teaching must be courses that are either high demand, are core or are required for graduation. Class must have at least 5 students for graduate course and 10 for undergraduate course.

You may signify your acceptance of this/these summer assignments (s) by signing below.

Faculty signature _____ Department Head _____ Assistant Dean of Finance _____