HUMAN RESOURCES ADDITIONAL PAY FORM
Return completed form to Human Resources Data Services, 1599 Clifton Road

EMPLOYEE INFORMATION
Name (Last, First, Middle) ___________________________________________ Employee ID # ____________
Employee Record # ___________________________________________ Pay Group ________________________

ADDITIONAL PAY INFORMATION
EARNINGS CODE (Choose from list below)
OBR – OBRA Adjustment (For use by HR Benefits Staff Only)
FRS – Freshman Seminar
FR7 – (17 IC) Freshman Seminar
FR8 – (10 IC) Freshman Seminar
FR9 – (19 IC) Freshman Seminar
MHA – Minister Housing Allowance
MH7 – (17 IC) Minister Housing Allowance
MH8 – (18 IC) Minister Housing Allowance
SRT – Summer Research/Teaching
SR7 – (17 IC) Summer Research/Teaching
SR8 – (18 IC) Summer Research/Teaching
SR9 – (19 IC) Summer Research/Teaching
OMI – Over Maximum Lump Sum
OM7 – (17 IC) Over Maximum Lump Sum
OM8 – (18 IC) Over Maximum Lump Sum
OM9 – (19 IC) Over Maximum Lump Sum

Effective Date __________________________ Earnings per Pay Period __________________________ End Date __________________________
Goal (Total) Amount __________________________ Department ID __________________________ Job Code __________________________

Job Earnings Distribution
Use current distribution on employee’s job record? If “yes” DO NOT complete SmartKey information.
Yes ☐ No ☐

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Total per pay period: $ __________

APPROVALS
Approval Signature __________________________ Date __________________________
Data Entry signature __________________________ Data Entry Date __________________________

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