

**REQUEST FOR FACULTY EXCEPTION TO THE LIMIT  
ON SUMMER APPOINTMENT\***

To: Unit Executive Officer

I, \_\_\_\_\_, hereby request permission to be employed by the  
(Name, typed or printed)  
University for the following summer period in addition to my academic year appointment:

From: \_\_\_\_\_ to: \_\_\_\_\_ at: \_\_\_\_\_ % time.

I certify that the work will be performed during the period for which compensation is requested.

I understand that this summer appointment decreases or eliminates my vacation time for the year.

I also understand that this appointment will be incorporated in the Activity Reporting System for documentation of compensation for personal services.

\_\_\_\_\_  
Signature Date

**Approvals:**

\_\_\_\_\_  
Unit Executive Officer, Date  
Home Department

\_\_\_\_\_  
Dean, Date  
Home College

**Additional Approvals, *if applicable*\*\*:**

\_\_\_\_\_  
Unit Executive Officer, Date  
Appointing Department

\_\_\_\_\_  
Dean, Date  
Appointing College

**Additional Approvals, GRANT FUNDED ONLY:**

I certify that:

- a. Funds are available to pay the proposed summer appointment and that the work to be performed will be consistent with the objectives of the work approved by the sponsor.
- b. Any re-budgeting of available funds to permit this appointment will not interfere with previous commitments to student support, equipment acquisition, service contracts, etc.
- c. If funds are from an external sponsor, the sponsor's rules permit the proposed appointment.

\_\_\_\_\_  
Principal Investigator's Signature Date

\*This form is required for faculty who exceed 2/9ths summer @ 100% rate. **This form must be submitted electronically to Faculty Affairs HR at the time of the appointment transaction.** For auditing purposes the original must be maintained at the department level.

\*\*This applies to individuals who are being employed in a unit outside of their home unit for the summer.