



### SPECIAL PAYMENT FORM

For work performed by Ramapo College employees

**A. APPROVAL FOR WORK TO BE DONE** (Approvals for Special Payment must be obtained before work is performed)

Unit/Organization \_\_\_\_\_ Date \_\_\_\_\_

Name of Employee \_\_\_\_\_ Current Title \_\_\_\_\_

Banner ID \_\_\_\_\_

Descrip. of Assignment \_\_\_\_\_

Title during Assignment \_\_\_\_\_

Date(s) and Hour(s) \_\_\_\_\_ Number of Hours or Number of Credits \_\_\_\_\_

Compensation rate \$ \_\_\_\_\_ or Rate per Credit \_\_\_\_\_ Total Compensation \_\_\_\_\_

*If a payment schedule is required, please attach to this form*

**IF GRANT FUNDED**

\_\_\_\_\_  
Name of Grant \_\_\_\_\_ Begin Date \_\_\_\_\_ End Date \_\_\_\_\_

**FUNDING SOURCE(S)**

FOAP \_\_\_\_\_ Fund \_\_\_\_\_ Organization \_\_\_\_\_ Account 6078 \_\_\_\_\_ Program \_\_\_\_\_

**PREPARED BY** \_\_\_\_\_  
Please Print \_\_\_\_\_ Date \_\_\_\_\_

**APPROVED BY** \_\_\_\_\_  
Required Signatures Unit Head \_\_\_\_\_ Date \_\_\_\_\_ Provost/Vice President/Academic Affairs \_\_\_\_\_ Date \_\_\_\_\_

**B. APPROVAL FOR PAYMENT (to be completed after assignment is completed)**

Required Signatures:

1) Assignment Supervisor \_\_\_\_\_ Date \_\_\_\_\_ 3) Human Resources - Employee Records \_\_\_\_\_ Date \_\_\_\_\_

2) Budget Office or Grant Comptroller \_\_\_\_\_ Date \_\_\_\_\_ 4) Payroll Manager \_\_\_\_\_ Date \_\_\_\_\_

**C. PAYMENT (NOTES)**

\_\_\_\_\_  
Amount Paid \_\_\_\_\_ Date \_\_\_\_\_ Payroll Number \_\_\_\_\_ Entered by \_\_\_\_\_

**NOTE:** All special payments must be in accordance with the College's Extra Compensation for Special Projects Policy, available on the HR web page, under Policies and Procedures. For questions, please contact the Dept. of Human Resources at ext. 7506 or ext. 7781 for questions regarding payments.

This form can be found at <http://guide.ramapo.edu/hr/forms/index.html>

# INSTRUCTIONS FOR COMPLETING THE SPECIAL PAYMENT FORM

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The Special Payment Form is used to obtain approval for work to be performed. After work is completed the completed form can be used to request payment for a stipend to be paid to an employee (account 6078) OR a stipend or honorarium to a non-employee (account 7117). This form takes the place of all previous versions of the Special Payment Form. Old forms will no longer be accepted.

In order to pay a stipend or honorarium to a non-employee an Accounts Payable Voucher must be completed.

All special payments must be in accordance with the College's Extra Compensation for Special Projects Policy, available on the HR web page, under Policies and Procedures. For questions about this, please contact the Department of Human Resources at ext. 7506.

<http://www.ramapo.edu/resources/adminCompliance/humanresources/policies/extraCompensation.html>.

This form should be used to obtain approval for payment of the following types of assignments:

Co-op and Independent Study advisors, New Dean Transition, Evaluating Plex, Faculty Advisor, Faculty Supervisors (Teacher Ed), Graduate Council, Law and Society, Masters mentors, Note taker for OSS, SBR Projects, Test Proctor/Accuplacer, Testing ESL students and other miscellaneous assignments such as CLA implementation, ASEC implementation, Summer Projects, Faculty AOD Coordinator, LWS Field Studies, Costume designer.

**\*\* Approvals for Special Payment must be obtained before work is performed \*\***

## ROUTING:

### **A. Approval for work**

1. The originating unit must complete section A of the form. *Note example given in italics*
  - ♦ The Name and current title of the person who will perform the work. *Joe Smith, Adjunct Professor*
  - ♦ Description of assignment & title during assignment. *Costume design for Shakespeare plays, Costume Designer*
  - ♦ Date(s) of Assignment - *March 8-10, 2004 (please be sure to include the year)*
  - ♦ Length of Assignment or Number of Credits – *15 hours (or 3 credits)*
  - ♦ Compensation Rate or Rate per Credit - *\$25/hour (or \$900 per credit)*
  - ♦ Total Compensation - *\$375 (or \$2,700)*
  - ♦ Payment Schedule – In some cases the payment is staggered over the course of several months. If the unit or employee requests that payment be on a regular payment schedule, please attach a separate sheet containing the determined payment schedule.
  - ♦ Grant Funding – If this is grant funded please provide the name of the Grant and the beginning & end dates of the grant
  - ♦ Funding source – the correct Fund, Organization, Program and Activity codes must be filled in. Activity code will only be used when using allocated SPIF funds. Account number for all Special Payments to employees of the College is 6078. Earnings Code is always SPR.
  - ♦ The name and signature of the person who prepared the form must be filled in.
  - ♦ The Unit Head signs the form and passes it to the Provost, Vice President or Academic Affairs for signature.
  - ♦ The Provost, Vice President or Academic Affairs office then passes the form back to the preparer who holds the form until the employee is to be paid for work performed.
2. The originating unit holds the approved form and when the work is completed, the form is sent to the person who supervised the work being performed.

### **B. Approval for Payment**

1. When work is completed, the form is signed by the supervisor and passed to the Grant Comptroller for verification of funds and signature **if the special payment is grant funded**. If it is **not grant funded**, the preparer passes the form to the Budget office for verification of funds and signature.
2. Budget forwards the form to Human Resources for review and signature.
3. Human Resources passes the form to the Payroll office for signature and to process payment.

### **C. Payment**

1. The Payroll office records when the payment was made and how much was paid. If payment is to be staggered over several pay periods, that is noted in the area below.