

**PRIORITY ORDERING TEST (POT)\***  
**Extra-Compensation for Extra-Work**

1. Name \_\_\_\_\_ E-mail Address \_\_\_\_\_  
Dept. \_\_\_\_\_ College \_\_\_\_\_  
Signature \_\_\_\_\_ Phone Number \_\_\_\_\_

2. Project Title \_\_\_\_\_

3. Funding Agency \_\_\_\_\_

4. Brief Description of Proposed Work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Can proposed work be done on a Released-Time basis? Yes/No (Circle one)  
Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Can proposed work be done during the Summer Session? Yes/No (Circle one)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Characteristics of proposed work:  
  
a) Is it interdepartmental or involves a separate or remote operation? Yes/No (Circle one)  
Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- b) Is it incidental, inconsequential, sporadic, or negligible in nature? Yes/No (Circle one)  
 Explain: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- c) Is it approved in writing by the sponsoring agency or is it specifically provided for in the proposal? Yes/No (Circle one)

Explain and attach documentation \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

8. Prior Extra-Compensation:

- a) How much extra-compensation did you receive during the last academic year and summer?

Amount \_\_\_\_\_ Percentage of base \_\_\_\_\_ Duration \_\_\_\_\_

- b) How much extra-compensation have you received for the current academic year?

Amount \_\_\_\_\_ Percentage of base \_\_\_\_\_ Duration \_\_\_\_\_

- c) How much extra-compensation are you requesting now?

Amount \_\_\_\_\_ Percentage of base \_\_\_\_\_ Duration \_\_\_\_\_

9. CERTIFICATION:

Based on my evaluation of responses to items 5-8 above, and my understanding of the Southern University-Baton Rouge (SURB) *Extra Compensation Implementation Plan*, my signature does hereby attest to my position relative to this request.

\_\_\_\_\_  
 Chairman/(Director) Date Approve/Disapprove (state item #\_\_\_\_)

\_\_\_\_\_  
 Dean/(Director) Date Approve/Disapprove (state item #\_\_\_\_)

\_\_\_\_\_  
 Director, OGSP Date Approve/Disapprove (state item #\_\_\_\_)

\_\_\_\_\_  
 Vice Chancellor, ORSI Date Approve/Disapprove (state item #\_\_\_\_)

\_\_\_\_\_  
 Chancellor Date Approve/Disapprove (state item #\_\_\_\_)

