

## IMMEDIATE RECOGNITION/BONUS ACTION FORM

Please complete the information below and submit it to the Budget Unit Director and Vice President for approval. Upon approval, the original form will be forwarded by the Vice President to Human Resources for processing.

When monetary awards are given, funds must be available in sub-object code 4036 prior to submitting this form to Human Resources. If this form is processed and funds are not available, the Budget Office will report it as a negative budget variance. Budget adjustments should be forwarded directly to the Budget Office.

- Monetary awards cannot exceed \$5,000 per fiscal year (hourly and classified only).
- Recognition leave cannot exceed 5 days from January 10 January 9; expires 12 months from the date it was awarded (excludes hourly and adjuncts).
- Effective dates should be the 10th and 25th for classified, administrative/professional faculty and teaching & research faculty and the 1st and 16th for hourly and adjuncts.

Budget Code		VP Area			Department Name			Effective Date			
Position Number		UIN			Last Name		First Name		MI		
								_			
Employee Type		FLSA Status (classified only)			Type of Award		Individual or	Individual or Team			
Monetary Awar	d Amount							Has the employe	e received	1	
(Cannot exceed	Has the employee						recognition leave this calendar year?				
for classified en	s monetary award th			his fiscal year? Awarded (Cannot exceed 5		idavs )			,		
per fiscal year)					(oumot oxooou (	, aayo ,					
Eligibility Requirement					, hishas an last safe						
					r higher on last perfo	notices, letter of repriman	d or sanctions)				
			-	-							
Satisfactory/Contributor Written Notice/Letter Performance of Reprimand			Date of Last Action, if applicable		Recommending Super	ling Supervisor / Contact for Processing Questions					
i chomanee	01 1	Reprint			аррисаріе						
Explain reason for rec	ognition a	ind time	e period (us	se specific	dates) (attach addit	ional pages if necessary):					
								<b>D</b>	<b>T</b> 0		
Punon inorda Cismotum				Printed name			,	Processing	ě		
Supervisor's Signature							ate		Date	Initials	
Budget Unit Director			Printed name			ate	Payroll				
						r ayron					
Vice President			Printed I		name	D	ate	Eligibility			
								Verified			
							Overtime				
Human Resources			Printed name			D	ate	Recalculated			