

This form is to be completed and signed before any work can commence. The Pre-Approval should be submitted at least two weeks prior to the start date.

A. To be completed by the Division or Unit Offering the Assignment:		
Faculty Receiving Assignment		
<input type="text"/>	<input type="text"/>	
First Name	Last Name	
Assignment Reviewer/Lead		
<input type="text"/>	<input type="text"/>	
First Name	Last Name	
MPP/Appropriate Administrator		
<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	Last Name	Title
<input type="text"/>	<input type="text"/>	
College/Unit Name	Department Name	
<input type="text"/>	<input type="text"/>	
Department ID	Phone	
Department Contact		
<input type="text"/>	<input type="text"/>	
First Name	Last Name	
Project Title		
<input type="text"/>		

- **Describe in detail** the scope of the work to be conducted and estimated days required to complete the assignment.
- Also, how is this assignment different from the faculty's regular position? (Additional sheets may be attached if necessary)

- This appointment scope is within Unit 3 duties
- This appointment requires the specific skills of the faculty member for a special project

What deliverables are expected at the end of the assignment?
(Additional sheets may be attached if necessary)

Proposed Start Month/Year

Proposed End Month/Year

Proposed Start Month should be the month the work begins.

Number of Non-Duty Days to be Paid per Pay Period.

Faculty can be paid as special consultants during non-duty days only.

Jan	<input type="text"/>	Feb	<input type="text"/>	Mar	<input type="text"/>	Apr	<input type="text"/>	May	<input type="text"/>	Jun	<input type="text"/>
Jul	<input type="text"/>	Aug	<input type="text"/>	Sep	<input type="text"/>	Oct	<input type="text"/>	Nov	<input type="text"/>	Dec	<input type="text"/>

Daily Rate Calculators

- Faculty are usually appointed at current salary's daily rate
- Faculty may be paid at a higher or lower rate when justified by duties.
- Pay between \$122.00 - \$138.80 requires using a non-exempt classification position number (e.g., Special Consultant - NE, class code 8379).
- Pay a daily rate of \$138.81 or above allows use of an exempt classification position number (e.g., Special Consultant - E, class code 4660).
- Given the constraints imposed by Article 36 of the CBA, the funding sources for special consultants typically must be from non-general funds.

Method A: Actual Daily Rate

Choose your proper designation

Academic Year (AY) Faculty: <input type="checkbox"/>	Annual Compensation: \$	
12 Month Faculty: <input type="checkbox"/>	Daily Rate: \$	

Method B: Determine Total Compensation

Total payment to special consultant using any daily rate by number of days.

$$\$ \frac{\text{Daily Rate}}{\text{Daily Rate}} \times \frac{\text{Duty Days}}{\text{Duty Days}} = \$ \frac{\text{Total Compensation}}{\text{Total Compensation}}$$

Method C: Forecast Daily Rate by Allocated Dollars

Daily rate calculated from any proposed total payment to special consultant divided by number of days.

$$\$ \frac{\text{Available Funds}}{\text{Available Funds}} \div \frac{\text{Duty Days}}{\text{Duty Days}} = \$ \frac{\text{Daily Rate}}{\text{Daily Rate}}$$

Select Daily Rate Method:

Provide justification for any requested daily rate exceeding \$100 more than actual daily rate.

	<input type="checkbox"/> Method A (AY)
	<input type="checkbox"/> Method A (12 Month)
	<input type="checkbox"/> Method B
	<input type="checkbox"/> Method C
	<input type="checkbox"/> Manual Entry

Chosen Daily Rate: \$

Fund:

Special Consultant Position #:

B. To be completed by faculty member:

First Name	Last Name
College/Unit	Department Name
Employee ID	

* Faculty Member will sign after the Home College Manager approves.

Please check the box next to all other employment and assignments that apply during the term of this assignment.

Proposed Start Month/Year	Proposed End Month/Year
<input type="checkbox"/> University RSCA Reassigned Time <input type="checkbox"/> SJSU Research Foundation <input type="checkbox"/> Winter Sessions <input type="checkbox"/> Summer Sessions	<input type="checkbox"/> Special Sessions <input type="checkbox"/> SJSU Tower Foundations <input type="checkbox"/> Category 2403 <input type="checkbox"/> Other CSU Campus

Has this project already started? Yes No

I certify that I have authorized this work as stated above.

_____ Signature of MPP/Appropriate Administrator	_____ Date
_____ Signature of Faculty Member	_____ Date
_____ Signature of Faculty Member's Home Department Chair/School Director	_____ Date
_____ Signature of Faculty Member's Home College Dean or Designee	_____ Date
_____ University Personnel Overload Approval	_____ Date

C. Certificate of Completion

After receiving the final report/deliverables from the faculty member the Assignment Reviewer identified in Section A, _____, will notify the Department Contact to initiate the Payment Request form. Submitting the Special Consultant Payment Request form to University Personnel is confirmation that the reviewer has received the agreed upon deliverables and is satisfied that the assignment is complete.

Payment will not be issued until the Faculty Special Consultant Payment Form is submitted correctly. Please keep your completed copy of this form to assist with filling out the Faculty Special Consultant Payment Form.

For University Personnel Use Only

Approved Denied

Comments