PLASE READ: Employee is responsible for submitting form with their supervisor's signature. Paying unit is responsible for any ePAFs and necessary temporary instructional title appointment for teaching assignments. Once fully approved at the College Dean/Supervisor level, please attach completed form to the Additional Pay ePAF for approval.

app	pointment for te	aching assignmen	its. <u>Once tu</u>	illy approved at the College Dear	1/Supervisor i	eve	ei, piease atta	ich co	mpietea forn	i to the	Additio	onal Pay ePAF for appro	<u>ovai.</u>	
E	Employee nan	ne:								Emplo	yee ID:		FTE:	
	Email addres	ss:												
	Uı	nit:					pervisor:							
	List ALL in-load teaching assignments from July 1, 2023 through June 30, 2024:													
	Semester/Year	Course Prefix/No./ S	Section Co	ourse Title	Proj. Enroll.		Semester/Year	r Co	urse Prefix/No./	Section	Course ⁻	Title		Proj Enroll.
1						5								
2						6								
3						7								
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			I I		1			I						
С	omplete this	section for extr	ra compei	nsation paid by OU for:										
T	eaching assig	nment(s)												
Se	emester/Year C	ourse Prefix/Number/	Section	Course Title			Aca	ademic I	Unit responsible t	for instruc	ction I	ndividual making assignment	Amour	nt to be pai
И	Vork other thai	n Teaching												
Dates of Assignment		Type of work	Type of work				Dep	partmer	artment making assignment		Individual making assignment		Amour	nt to be pai
Ch	artfield Spread	//Funding Informa	ation				<u> </u>							
		· ·												
	-		-	nature below indicates your un	_							= = = = = = = = = = = = = = = = = = =		
no	rmal work hou	rs. Additionally, c	compensat	tion in the form of a supplemer	ntal pay does	s n	ot result in a	contr	ibution from	the uni	versity	to your defined contrib	ution p	lan.
_														
Employee's signature/date			Employee's immediate supervisor approval/date Employee's Chair/Director/Sur					ervisor	approval/date	Collea	e Dean/S	Supervisor approval/date		