Eastern Illinois University – School of Continuing Education REQUEST FOR SUPPLEMENTAL PERSONAL SERVICES PAYMENT



Account No:

This form is used to request payments for:

- University Employees performing work outside their regular assignment
- · Persons hired as non-negotiated part-time temporary faculty
- Persons hired on a one-time basis

PART I - AUTHORIZATION

Work will be supervised by: William C. Hine, Dean
Fiscal Agent's authorization represents acknowledgment that personal services payments to the person indicated in Part II are in compliance with all Personnel and Payroll regulations applicable to Eastern Ninois University.
If, for some reason, the person indicated in Part II is unable to perform all or part of the service described, it is the Fiscal Agent's responsibility to notify the appropriate employment office in writing of changes to the payment due the payee.
Authorized by (signature): Fiscal Agent Date: , Fiscal Agent Date:
· · · · · · · · · · · · · · · · · · ·
PART II – TERMS OF EMPLOYMENT
Is this a new employee? X No Yes: Form I-9, Statement of Child Support Obligation, and Student Loan Default Certification must be attached.
Name: Eddy, Roger L. SSN:
Address:
Is hereby offered the following appointment: FA04 Instructor EDA 5960-931 Data Management in Educational 4SH Mt. Vernon 08/23-10/25
\$4000.00 plus \$80.00 for each student #13 and up
sponsored credit Compensation: \$ total to be paid in installment(s) as follows:
total to be paid in mistalment(s) as lonows.
This contract is subject to:
AVAILABILITY OF FUNDS and may be canceled due to lack of enrollment and/or sufficient funds. COMPLIANCE with all Eastern Illinois University Internal Governing Policies and Board of Trustees' Regulations and relevant statutory authority. No
other parties may be subcontracted to fulfill this contractual obligation.
This employment is not eligible for State University Retirement Service credit (SURS).
Director, Off-Campus Programs I accept the offer as outlined above Employee: Date: 8-3-04
I accept the offer as outlined above
Employee: Date: 5-304
BR 09-69-64
PART III - SUPERVISOR'S ACKNOWLEDGEMENT 17 Students
Is this a University Employee performing work outside his/her regular assignment?YesNo
If Yes, Supervisor's signature is required, and represents acknowledgement of this offer and verification that the above duties will not interfere with employee's regular assignment.
Supervisor:

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Account	No:	·
	Att The state of t	William C. Hine, Dean
Personnel	ent's authorization repres and Payroll regulations	sents acknowledgment that personal services payments to the person indicated in Part II are in compliance with all applicable to Eastern Illinois University.
If, for some	e reason, the person inc	licated in Part II is unable to perform all or part of the service described, it is the Fiscal Agent's responsibility to notify
WHEN THE	777	in writing of changes to the payment due the payee.
Authorize	ed by (signature):	Fiscal Agent Date: 11/22/04
.*)		
		PART II – TERMS OF EMPLOYMENT
		PARTII - TERMS OF EMPLOYMENT
ls this a ne	w employee? X No	form I o Statement of Old I o
la Care		form I-9, Statement of Child Support Obligation, and Student Loan Default Certification must be attached.
Name:	Eddy, Roger	SSN:
Address:		
s hereby	offered the followin	G appointment: Instructor EDA 5000 004 Date 14
		g appointment: Instructor EDA 5960-991 Data Management in Educational Adm 4SH Olney 02/25-26. 03/11-12, 04/08-09
54000.00 p	olus \$80.00 for each s	
ponsored		nodelik ii To alid ap.
Compensa		total to be paid in installment(s) as follows:
		<i>(a)</i> 101043.
his contr	act is subject to:	
		be canceled due to lack of enrollment and/or sufficient funds, is University Internal Governing Policies and Board of Trustees' Regulations and relevant statutory authority. No to fulfill this contractival obligation.
ther parties his emplovr	may be subcontracted ment is not eligible for S	to fulfill this contractual obligation. tate University Retirement Service credit (SURS).
	ff-Campus Programs_	Date
accept the	e offer as outlined a	
mployee:	1 Jan	Date: 12-9-04
		Sale / /
		PART III - SUPERVISOR'S ACKNOWLEDGEMENT 63-69-65 - 11
this a Unive	ersity Employee perform	ing work outside his/her regular assignment?YesNo
iployee's re	gular assignment.	red, and represents acknowledgement of this offer and verification that the above duties will not interfere with
spervisor:		Date:
		Date:

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Account No:

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- Persons hired as non-negotiated part-time temporary faculty
- Persons hired on a one-time basis

PART	I - AL	ITHOR	IZAT	ION
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Work will be supervised by: William C. Hine, Dean	
iscal Agent's authorization represents acknowledgment that personal services payments to the person indicated in Part II are in compliance with all personnel and Payroll regulations applicable to Eastern Illinois University.	
f, for some reason, the person indicated in Part I is unable to perform all or part of the service described, it is the Fiscal Agent's responsibility to not ne appropriate employment office in writing of changes to the payment due the payee.	fy
Authorized by (signature): 4-6-05	
PART II – TERMS OF EMPLOYMENT	
dia ang ang laura 2 V Ala	-
s this a new employee? X No Yes: Form I-9, Statement of Child Support Obligation, and Student Loan Default Certification must be attached.	
lame: Eddy, Roger SSN:	
address:	
s hereby offered the following appointment: SU05 EDA 5960-970 Data Management 4SH Olney 06/03-04, 06/08, 06/15, 06/22, 07/08-09	
4000.00 plus \$80.00 for each student #13 and up	
ponsored credit compensation: \$ total to be paid in installment(s) as follows:	
This contract is subject to: VAILABILITY OF FUNDS and may be canceled due to lack of enrollment and/or sufficient funds. COMPLIANCE with all Eastern Illinois University Internal Governing Policies and Board of Trustees' Regulations and relevant statutory authority. No ther parties may be subcontracted to fulfill this contractual obligation. his employment is not eligible for State University Retirement Service credit (SURS). Date: 45-05 Date:	
accept the offer as outlined above. Figure 1. Date: 4-22-07	
Employee:	-
PART III - SUPERVISOR'S ACKNOWLEDGEMENT BR 06-09-65 - 14	
this a University Employee performing work outside his/her regular assignment?YesNo	
Yes, Supervisor's signature is required, and represents acknowledgement of this offer and verification that the above duties will not interfere with mployee's regular assignment.	22
Supervisor: Date:	

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Account No:

This form is used to request payments for:

- University Employees performing work outside their regular assignment Persons hired as non-negotiated part-time temporary faculty

Home Org: 122300

Persons hired on a one-time basis

PART I - AUTHORIZATION

Work will be assessing the William Column	
Work will be supervised by: William C. Hine, Dean	
Fiscal Agent's authorization represents acknowledgment that personal services payments to the person indicated in Part II ar Personnel and Payroll regulations applicable to Eastern Illinois University.	e in compliance with all
If, for some reason, the person indicated in Part II is unable to perform all or part of the service described, it is the Fiscal Ager the appropriate employment of the payment due the payee.	nt's responsibility to notify
Authorized by (signature), Fiscal Agent Date:	7/11
PART II – TERMS OF EMPLOYMENT	
PARTIT PERIMO OF EIN ESTIMENT	
Is this a new employee? X No Yes: Form I-9, Statement of Child Support Obligation, and Student Loan Default Certification must	st be attached.
Name: Eddy, Roger E Number: CRN: 35950	0
Address:	
Is hereby offered the following appointment: SP12: EDA 6810-950 School Law Seminar 2SH	
Mt. Vernon / ROE Annex 02/03-04, 03/30-31	
\$3000.00 plus \$50.00 for each student #13 and over	
SCE Compensation: \$ total to be paid in installment(s) as follows:	
This Supplemental Personal Services agreement may be cancelled at the sole discretion of Eastern Illinois University due to, availability of funds or insufficient enrollment, and is subject to compliance with applicable laws and University policies and pro Supplemental Personal Services agreement does not entitle the named individual to State University Retirement (SURS) cred	ocedures. The
Director, Academic and Professional Development Panel & Collins Date: //-	-15-11
I accept the offeres outlined above.	
1 2 1	
Employee: Date: 11-23-1/	
BR 2-7-12	
PART III – SUPERVISOR'S ACKNOWLEDGEMENT	
PART III - SOT ERVISOR'S ACKNOWLEDGENERY	
Is this a University Employee performing work outside his/her regular assignment?YesNo	
If Yes, Supervisor's signature is required, and represents acknowledgement of this offer and verification that the above duties employee's regular assignment.	will not interfere with
Supervisor: Date:	