

First-Year Odyssey Seminar Request for Compensation

Seminar Title _____

Faculty Name _____ Semester and Year to be Offered _____

OneUSG Connect Employee ID _____

OneUSG Connect Employee Record Number _____

School/College/Division _____

Home Department _____
(Department Name and Phone Number)

Home Department OneUSG Connect Combination Code _____
(Account from which you will receive FYO compensation)

Faculty Contact Information Email _____ Phone _____
Campus Address _____

Contract Information Academic _____ Fiscal _____ No Contract _____

Earn Code Information OVL-Full-Time Faculty Overload _____ REG-Part-Time Faculty Overload or Rehired Retiree _____

Will this seminar be co-taught? Yes _____ No _____ (If yes, a form must be completed for each instructor.)

What percentage will you teach? _____

Who will co-teach this course? _____ What percentage? _____
Name Email

Who will co-teach this course? _____ What percentage? _____
Name Email

Extra compensation or scholarly support for teaching a First-Year Odyssey Seminar is \$3,500. If the seminar is co-taught, this amount will be divided based on the percentage taught. A compensation form must be completed for each person teaching.

The First-Year Odyssey Seminar Program will allocate \$3,500 for each seminar taught. The faculty member responsible for teaching a First-Year Odyssey Seminar may choose to receive these funds either as extra compensation or as scholarly support.

Extra Compensation: Will be paid in 5 paychecks throughout the semester, \$700 per paycheck, and is subject to taxes. It will not count towards retirement.

Scholarly Support: May be used for any expenditures allowed for state funds; for example, travel, equipment, salary for a teaching assistant, or books. It may not be spent on food or personal items. The money will be distributed to the department at the beginning of the semester and must be spent by the end of the fiscal year.

I would like to receive extra compensation: _____ I would like to receive scholarly support: _____

I agree that teaching the First-Year Odyssey seminar will be in addition to my normal workload.

Employee Signature (required) _____ Date _____

Department Head Signature (required) _____ Date _____

Dean Signature (required) _____ Date _____

Vice President for Instruction Signature (FYO Program will obtain) _____ Date _____

After Dean's approval, please submit this form to the FYO Program Office, 104 Holmes-Hunter Academic Building, Campus, or fyo@uga.edu.