

EXAMPLE 1

SALARIED BI-WEEKLY - LWOP

You are the HR Program Coordinator for the School of Public and International Affairs (SPIA). You are responsible for submitting personnel and budget amendment documents. The Business Manager sent you an email stating that the **Administrative Associate I** will be on leave without pay from **March 6, 2017** through **April 28, 2017**. The employee is returning to work on **May 1, 2017**.

The department number is **900**. The position short title is **CLRTCXXA** and the job class code is **00095**. The current annual salary is **\$28,384**. The position is paid from account **1011GH900000**, object code **51120**.

The following are calculations that you will need when filling out the personnel document.

Step 1		
Work hours in the current fiscal year		
# of work days in Fiscal Year	X	# of work hours per day = # of work hours in Fiscal Year
261		8 = 2,088

Step 2		
Hourly rate		
Annual Salary	/	# of work hours in Fiscal Year = Hourly Rate
\$28,384		2,088 = \$13.594

Step 3		
Position Budget		
# of days on LWOP (3/6-4/28)	X	# of work hours per day = Total # of hours on LWOP
40		8 = 320

Step 3 Continued		
Position Budget		
Total # of hours on LWOP	X	Hourly Rate = Total LWOP Amount
320		\$13.594 = \$4,350.08

Step 3 Continued		
Position Budget		
Current Position Budget	-	Total LWOP Amount = Position Budget
\$28,384		\$4,350 = \$24,034

Step 4		
EFT		
Position Budget	/	Annual Salary = EFT
\$24,034		\$28,384 = 0.84700

EMPLOYEE PERSONNEL REPORT

UNIVERSITY OF GEORGIA

DOCUMENT NO.	PAGE	DATE	FY	DEPARTMENT PHONE	COLLEGE OR DIVISION
900570015	1 of 1	12/22/2015	17	7065426956	
DEPARTMENT / PROJECT			PRI DEPT	HIGH DEGREE	INSTITUTION
BUDGET DIVISION			027		
UGAID	LAST NAME	FIRST NAME/INITIAL	MIDDLE NAME/INITIAL	SUFFIX	
HOME STREET OR ROUTE NO. (LINE 1)		NON-WORK PHONE	BIRTH DATE	SPOUSE'S NAME	CHAIR
HOME STREET OR ROUTE NO. (LINE 2)		UNIVERSITY PHONE	CITIZEN OF	I-9	VISA
			United States	Y	
HOME CITY	STATE	ZIP + 4	UNIVERSITY BLDG. NAME	BLDG NO/FLOOR/RM	
			BUSINESS SERVICES	0110 / / 0226	

UGA EMPLOYMENT HISTORY
 (C) CURRENT (P) PREVIOUS
 DATE / /

PAY TYPE
S

UGA % TIME	ACTION MO DA YR
100 000	03 06 2017

(E) EXEMPT (N) NON-EXEMPT (T) TIPPED
 (M) MALE (S) SINGLE (Y) FACULTY RANK
 (F) FEMALE (M) MARRIED (N) NON-FACULTY
 HISPANIC OR LATINO/A
 WHITE AFRICAN AMERICAN ASIAN
 AMERICAN INDIAN/ALASKA NATIVE NATIVE HAWAIIAN/OTH PAC ISLAND

FOR PAYROLL DEPT USE ONLY

FED EXM	STATE EXM	OASDI	RETIRE	GDCP	COUNTY MONEY (PER PAY PERIOD)
		HI	EIC		

COOP. EXT. EMPLOYEES ONLY	PAYROLL PAYMENT DISTRIBUTION
UGA SALARY	<input checked="" type="checkbox"/> (1) DEPARTMENT DISTRIBUTION CODE 100
COUNTY MONEY	
TOTAL	

TRX	HOME DEPT	SHORT TITLE	POSN NO.	APPT. BEGIN MO DA YR HR	APPT. END MO DA YR HR	JOB CLASS CODE	POSITION TITLE	POS % TIME	C N	FULL TIME ANNUAL SALARY	S C	SUPPLEMENT AMOUNT
	900	CLRTC	56A	07 01 16 00 0	06 30 17 08 0	00095	ADMINISTRATIVE ASSOCIATE I	1 00000	N	28384		

PAYROLL AUTHORIZATION

TRX	HOME DEPT	SHORT TITLE	POSN NO.	ACCOUNT	FISCAL YEAR EFT	BUDGET	FROM THRU	AMOUNT PER PAY PERIOD / HOURLY RATE	MO DA YR HR
	900	CLRTC	56A	1011GH900000	0 84700	24034			07 01 16 00 0 06 30 17 08 0 13 594
TOTALS					0 84700	24034			

REASON CODES

(N) Leave Without Pay From: 3/6/17 To: 4/28/17

REMARKS

ON LWOP FROM MARCH 6TH THROUGH APRIL 28TH FOR A TOTAL OF 320HRS

Fed Retire: N

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DOCUMENT NO.	PAGE	DATE	FY	DEPARTMENT/PROJECT
900570015	1 of 1	12/22/2015	17	BUDGET DIVISION
UGAID	LAST NAME	FIRST NAME/INITIAL	MIDDLE NAME/ INITIAL	SUFFIX

BUDGET POSITION

UNIVERSITY OF GEORGIA BUDGET AMENDMENT

TRX	HOME DEPT	SHORT TITLE	POSN NO.	APPT. BEGIN MO DA YR HR	APPT. END MO DA YR HR	JOB CLASS CODE	POSITION TITLE	POS % TIME	C N	FULL TIME ANNUAL SALARY	S C	SUPPLEMENT AMOUNT
	900	CLRTC	56A	07 01 16 00 0	06 30 17 08 0	00095	ADMINISTRATIVE ASSOCIATE I	1 00000	N	28384		

BUDGET AMENDMENT (PERSONAL AND NON-PERSONAL SERVICES)

TRX	HOME DEPT	SHORT TITLE	POSN NO.	ACCOUNT	OBJECT	DESCRIPTION	CURRENT EFT	CURRENT BUDGET	CHANGE EFT	CHANGE AMT	REVISED EFT	REVISED BUDGET
	900	CLRTC	56A	1011GH900000	51120	SALARIED BI-WEEKLY	1 00000	28384	0 15300-	4350-	0 84700	24034
	900	LBCLR	L A	1011GH900000	51130	HOURLY BI-WEEKLY		-83144		4350+		-78794
TOTALS							1 00000	-54760	0 15300-		0 84700	-54760

FUNDING SOURCE (DEPARTMENTAL INCOME OR CONTINGENCY)

TRX	ACCOUNT	OBJECT	FUNDING SOURCE	CHANGE AMT	+/-	REMARKS / REFERENCE

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