



### **Administrative Salary Supplement Agreement**

It is the policy of the University of Georgia to award salary supplements to those faculty and staff members who are assigned and accept certain special duties. If this member chooses to remove himself/herself from these special duties or is removed by the university administration, the salary supplement will cease effective with the date of ceasing the assigned duties.

It is understood by the undersigned that I will be paid an annual salary supplement of \_\_\_\_\_ effective from \_\_\_\_\_ to \_\_\_\_\_ in order to compensate me for performing additional duties at a responsibility level above my current position. When my assignment no longer requires the additional responsibilities and duties for which the salary supplement is awarded, I understand that my annual salary will be reduced by the amount of the supplement.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Employee

\_\_\_\_\_  
UGA Employee Number

\_\_\_\_\_  
Budget Position

\_\_\_\_\_  
Home Department

\_\_\_\_\_  
Job Title before Supplement

\_\_\_\_\_  
New Title (if applicable)

\_\_\_\_\_  
New Assignment Description

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### **Approval Signatures**

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
Dean or Vice President (if required by employing unit)