

LSUE | OFFICE OF
HUMAN RESOURCE MANAGEMENT
COMPENSATORY REQUEST

Employee Name:

Division/ Department:

Business Title:

Account(s) for Payment:

PAYMENT TYPE

One Time Payment: used to compensate employees for short-term, one-time services to the University in addition to their scheduled job responsibilities.

Start Date:

End Date:

Total Payment:

Justification:

Period Activity Payment: used to compensate **FACULTY** for course instruction over a defined period.

Professional Instruction Allowance: used to compensate **PROFESSIONAL** employees only for course instruction and/ or development.

Start Date	End Date	Employee Education:				
Course:	Course #:	Course Section:	Student Enrollment:	/	Pay:	FTE:
Course:	Course #:	Course Section:	Student Enrollment:	/	Pay:	FTE:
Course:	Course #:	Course Section:	Student Enrollment:	/	Pay:	FTE:
Course:	Course #:	Course Section:	Student Enrollment:	/	Pay:	FTE:
Course:	Course #:	Course Section:	Student Enrollment:	/	Pay:	FTE:

APPROVALS

Direct Supervisor

Dean/ Division Head

Vice Chancellor for
Academic Affairs

Vice Chancellor for
Business Affairs

Chancellor