

Overload Agreement

This form is for Exempt Full-time Staff (Non-Faculty).

The overload agreement approvals must be obtained before beginning the assignment.

Name: _____ S Number: _____

Division/Dept.: _____

Overload Assignment Description:

The employee agrees to perform the described assignment above according to the following term and conditions:

1. Except in rare approved circumstances, this overload staff assignment is not within the scope of the employee's primary working assignment.
2. Completion of this overload assignment will not interfere with the employee's primary assignment. Should the assignments begin to interfere; a plan to manage them will be arranged with the primary assignment supervisor.
3. The employee has permission from the College Grants and Contracts Officers. (For cases where partial or total compensation comes from Federal grants or contracts).
4. The employee shall receive \$ _____ to be paid in a one-time lump sum payment following completion of this non-teaching assignment.

Employee _____
Date

First Level Supervisor: _____ Date: _____

Second Level Supervisor: _____ Date: _____

College Grants and Contracts Officer: _____ Date: _____
(if applicable)

Human Resources: _____ Date: _____

Vice President/Provost: _____ Date: _____

**Staff (non-teaching) assignments require a One-time Payment PAF and this form.
Adjunct teaching assignments require an Adjunct Teaching Agreement.**