

GENERAL INFORMATION

Employee Bonus and Incentives Request

Please consult University Policy HR5016 before completing this form. Submit this completed form to hrservicecenter@memphis.edu or deliver to 165 Administration Building.

Employee Full Name:			Banner ID:					
Department:		Job Title:				E-Class:		
PAYMENT INF	ORMATION (if a grai	nt. please ens	sure vour grant allo	ws bonus charges	prior to submiss	ion)		
Index Fund		Org	Program	Account (circle one)		Suffix	Earnings Code	
		Ü	J	AD/AE/AM/CH: 61681 CL/S8: 61381 F1/FA/F9/FD: 61281		BN	613	
TYPE OF BON	IUS (Complete one	section/col	umn ONLY; attac	h additional com	ments page if	needed)		
Performance-Based Bonus		Project-Based Bonus			Variable Compensation Plan Bonus			
Bonus Justification:		Project Da	Project Dates: From To Deliverables:			Attach/upload a copy of the pre-established and approved Variable Compensation Plan. Bonus Period: From To To Explanation:		
Amount: \$(Not to exceed \$15,000 or 10% of employee's base salary, whichever is greater)		Amount: \$(Not to exceed \$5,000 or 10% of employee's base salary, whichever is greater)			Amount: \$(Amount must be in agreement with the stipulations included in the Variable Compensation Plan)			
APPROVAL S	IGNATURES							
Department H	ead (Requestor): Pr	int Name	nt Name Signature			Date:		
Divisional Lead	der (Approver):					Date:		
Human Resou	urces (Approver): _					Date:		
President (Exceptions Only):						Date:		