Choice the type of Bonus that applies:

- Standard employee bonus in accordance with State Bonus Proviso and Guidelines.  
  **Note:** Employees may not receive more than $3000 per fiscal year.

- Faculty/Staff Award in accordance with Award Plans approved by the Board of Trustees.

Department: _________________________________________________

Employee Name: _____________________________________________

College Wide ID: _____________________________________________

Class and Slot: _______/__________ Position #: ____________ E-Class: _______

Amount Requested: _____________ Index to be Billed _________________

Date Awarded: ______________

Source of Funds:

- State (cannot be used for bonuses issued under Faculty/Staff Award Plan)
- Federal  
  **Check to indicate that this bonus/award is supported by Federal funds and complies with Federal law. It is within the parameters of the grant/contract documents and the use of these funds is appropriate.**

- Other

Reason: *(Indicate which of the following best represents the reason for bonus request)*

- Contributions to increased organizational productivity
- Development and/or implementation of improved work processes
- Exceptional customer service
- Realized cost savings
- Faculty/Staff Award Plan
- Other – Explanation required below

Explain:

Submitted by: _________________________ (Date)

Department Head

Approved:

Director/Assoc. VP   (Date)
Vice President   (Date)
VP Human Resources   (Date)
President   (Date)

Disapproved:

Director/Assoc. VP   (Date)
Vice President   (Date)
VP Human Resources   (Date)
President   (Date)

Rev. 6.18ab