

Quick Reference to Wage Funding Change Form

All "ovals" contain drop down lists.

Select the first day of the pay period to be reallocated.

Type in the first letter of your department, click on the drop down to select.

This box must be completed.

Enter the the Fund(s) or Org(s) in col. 2. The Type (col. 1) and Name (col. 4) will be automatically populated.

Activity Code is only used for cost sharing. (col. 3)

Enter the %s in col. 5. The dollar amount will be automatically calculated and entered in col. 6.

Check one box and follow directions listed.

If questions need to be completed, please provide answers that clearly explain what happened and why the reallocation is needed.

Enter your name. The date is automatic.

Number of years in the dates drop down boxes (1 or 2): **1** Fiscal Year **2011**

George Mason University Department Wage Funding Change Form (Temporary)

Directions - This worksheet is for changes to current jobs only. ALL SHADED FIELDS ARE MANDATORY

G#	Name (Last, First, Middle)										
Job Information											
Effective Date of Funding Change SELECT	Department SELECT	Campus/Location SELECT									
Position Number	Supervisor Name	Supervisor Position Number									
Home Department Org	Timesheet Approver Name (if not Supervisor)		Timesheet Approver Position Number								
Job Title	Classification SELECT	Rate \$0.00	Hours -	Total Salary \$0.00							
Funding Change Reason											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 16.6%;">1</td> <td style="width: 16.6%;">2</td> <td style="width: 16.6%;">3</td> <td style="width: 16.6%;">4</td> <td style="width: 16.6%;">5</td> <td style="width: 16.6%;">6</td> </tr> </table>						1	2	3	4	5	6
1	2	3	4	5	6						
New Compensation/Labor Distribution <small>Provide an Activity Code for labor that represents committed cost sharing on a sponsored project</small>											
Type	Fund/Org	Activity	%		Funding End Date SELECT						
E&G/Ind			0.00%	\$0.00	# of pay periods in this form						
Type	Fund/Org	Activity	%		Funding End Date SELECT						
E&G/Ind			0.00%	\$0.00	SELECT						
Type	Fund/Org	Activity	%		Funding End Date SELECT						
E&G/Ind			0.00%	\$0.00	SELECT						
Type	Fund/Org	Activity	%		Funding End Date SELECT						
E&G/Ind			0.00%	\$0.00	SELECT						
Type	Fund/Org	Activity	%		Funding End Date SELECT						
E&G/Ind			0.00%	\$0.00	SELECT						
TOTAL			0.00%	0.00%	0.00%						
					<==== Total must be equal to 100%						
Check One											
<input type="checkbox"/> All Funding is on orgs (1xxxxx) or non-federal projects (22xxxx) - Go to Approvals (Skip Questions 1 & 2)											
<input type="checkbox"/> Funding change is to reallocate salary paid < 120 days from effective date of funding on a federal project (20xxxx) - Answer Q1 & Q2											
<input type="checkbox"/> Funding change is to reallocate salary paid > 120 days from effective date of funding on a federal project (20xxxx) - Answer Q1 & Q2 and answer both questions on a Cost Transfer Form											
1) Why was the salary charged originally to the sponsored project or non-sponsored org from which it is being transferred?											
2) Why does the salary belong to the sponsored project to which it is being transferred?											
Approvals											
Submitter/Initiator					Date						
					2/8/2011						
Principal Investigator											
Dean/Director											
Dept Head											
Sponsored Programs (if applicable)											
Budget Office (if applicable)											
Provost (if applicable)											

Start Here: If begin and end date of the change are in two different fiscal years, change to "2".
Example: 06/05/11 (FY11) to 7/03/11(FY12)

Enter FY for the effective date (start date) of funding change.

Enter employee's pay rate and the total number of hours worked in all pay periods included on this form. The "Total Salary" will be automatically calculated.

Select the end date of the pay period(s) to be reallocated. Dates listed are based on the data entered at the top of the form.

Automatically calculated based on the effective start and funding end dates entered.

The form sums the %s and checks for accuracy. An error message will appear if the total is not 100%.

Notes: All shaded cells are mandatory.
Data cannot be entered in automatically calculated or drop down menu cells.
Overwrite text is turned on. To replace text begin typing over the current text.
To clear text, hit the space bar.