

State University of New York
University-Wide Human Resources
Albany, New York 12246

UP-6 Request for Approval of Extra Service for M/C Employee

C2063-187

INSTRUCTIONS: Part I of this form is to be completed by the employee in an original plus three copies and submitted to the campus's Chief Administrative Officer for approval prior to commencing extra service. Two copies are then forwarded to the Director, University-Wide Human Resources in System Administration. The campus will retain one copy for its records. After approval is obtained from System Administration, a copy of the UP-6 will be sent directly to the Office of the State Comptroller with a copy back to the campus. The campus processing the approved appointment may then effect payment in accordance with the rules for extra service (upon receipt of vouchers) or concurrent appointment.

| I. To Be Completed by Employee | |
|---|---|
| Name _____ | Campus /Agency _____ |
| Address _____ | Title _____ |
| | Current Salary _____ |
| I request approval to render extra service on a <input type="checkbox"/> part-time <input type="checkbox"/> full-time basis to: | |
| At: (location of employment) _____ | Agency: _____ |
| | For the period from: _____ Through: _____ |
| Describe purpose of work: _____ | |
| Total compensation for this additional work will not exceed: | |
| This extra service will not interfere with my normal obligations to the University. | |
| _____ (date) | _____ Signature of Requesting Employee |

| II. Action by Chief Administrative Officer | |
|---|---|
| <input type="checkbox"/> Approved | <input type="checkbox"/> Disapproved |
| <input type="checkbox"/> Approved with the following limitations: | |
| _____ | |
| _____ | |
| _____ | |
| _____ (date) | _____ Signature Chief Administrative Officer/Designee |

| III. Action by System Administration | |
|---|---|
| <input type="checkbox"/> Approved | <input type="checkbox"/> Disapproved |
| <input type="checkbox"/> Approved with the following limitations: | |
| _____ | |
| _____ | |
| _____ | |
| Office of the Chancellor | |
| _____ (date) | by _____ Signature Director, University-Wide Human Resources/Designee |

Distribution Chief Administrative Officer Employee Copy System Administration (2 copies)