

FACULTY PAY OPTION FORM

The University of Houston offers to benefits eligible faculty the option of receiving their nine month contractual salary over a twelve month period and receive twelve equal (prorate) payments from October 1 to September 1 rather than nine equal payments from October 1 to June 1. Once a nine or twelve month option is elected, it is irrevocable for the fiscal year. Further, the option is automatically carried forward into each new fiscal year unless a change in pay option is submitted prior to September 1st of the effected year.

In order to secure proper identification into the University payroll system, it is essential that pay option selections be communicated upon acceptance of faculty status. In order to facilitate this process, please complete the information requested below and return to your department.

_____	_____
(Name – type or print legibly)	Social Security Number
_____	_____
Department/College	Fiscal Year

I wish to receive my pay in (check one):

- _____ 9 equal payments
_____ 12 equal payments

I understand that my election of the above option is irrevocable, for this current fiscal year. I understand further that this election will be automatically carried forward to each new fiscal year that I am employed by the University unless I submit a change in my pay option election prior to September 1 of the fiscal year that the change is to become effective.

Signature

NOTE: This form is required for all new faculty and continuing faculty changing pay options.