

Monthly Pay Schedule

Employee Name: _____
First
M.I.
Last

Employee ID#: _____

Effective _____ (today's date), I hereby authorize Butler University to distribute my academic year pay in the following manner (select one):

Staff	Faculty
<input type="checkbox"/> 9 month pay schedule (September – May) <small><i>Note:</i> Must be elected and returned to Human Resources prior to September payroll deadline of September 17th otherwise defaults to 12 month pay schedule.</small>	<input type="checkbox"/> 9 month pay schedule (September – May) <small><i>Note:</i> Must be elected and returned to Human Resources prior to September payroll deadline of September 17th otherwise defaults to 12 month pay schedule.</small>
<input type="checkbox"/> 10 month pay schedule (August – May) <small><i>Note:</i> Must be elected and returned to Human Resources prior to August payroll deadline of August 17th otherwise defaults to 12 month pay schedule.</small>	<input type="checkbox"/> 12 month pay schedule (September – August)
<input type="checkbox"/> 12 month pay schedule (September – August)	

Note:

Faculty: Turn in this form to the Provost Office prior to the first day of work.

Staff: Turn in this form to the Human Resource Office prior to first day of work.

Any benefit election deductions must reflect the same pay schedule.

The election of the 9 month pay schedule, 10 month pay schedule, or the 12 month pay schedule is irrevocable for the entire school year. The election of the 12 month pay schedule may have tax implications. Please contact Butler University's Human Resources department if you have any questions regarding your choice of the 9 month, 10 month, or 12 month pay schedule.

Signature: _____ Date: _____