



# WESTERN MICHIGAN UNIVERSITY

## 2019--2020 SALARY ELECTION OPTION FORM - Academic Year (AY) Faculty Only

### NEW Election or Change in Current Election

New AY Faculty     Current AY Faculty - Change in Election

Name: \_\_\_\_\_

Employee ID#: \_\_\_\_\_ Phone#: \_\_\_\_\_

Department: \_\_\_\_\_

I elect to receive my academic salary over **18 pay periods.**

I elect to receive my academic salary over **24 pay periods.**

#### I understand and agree to the following statements:

Academic Year faculty members whose base compensation for the academic year does not exceed \$280,000 are eligible to receive their pay over 24 pays. Faculty compensated at a base level above \$280,000 are NOT eligible for the 24 pay option and will be paid over 18 pay periods.

**IRS guidelines require this form to be returned BEFORE the beginning of the first pay period of the next commencing fall semester. IRS guidelines prohibit changing an election after the beginning of the first fall semester pay period. Elections continue in effect until a new salary election form is submitted prior to subsequent fall semesters.**

NOTE: If you are a new AY faculty member and this form is not returned in a timely manner, you will receive your academic salary over 24 pay periods.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

If **NEW AY** faculty, sign and RETURN this form with your letter of offer.

If **CURRENT AY** faculty, print, sign, and RETURN this form to University Budgets - Mail Stop 5221 or Fax: 269- 387-4287

#### INTERNAL USE ONLY

BUDGET	HR
GL Combo Code: _____	EmpRec#: _____
Contract Begin: _____	BenRec#: _____
Contract End: _____	BPP: _____
Budget Approval: _____	HR Entry: _____