

**Deadline: April 30 for the next fiscal year**  
**Submit this completed form to your department’s HR representative**

**General**

- Only **one pay option agreement** may be submitted for each fiscal year.
- Your current pay option agreement will continue until a new agreement is submitted.
- Pay dates for Options I and II are on the biweekly payroll schedule.

**Option I: Academic Pay Schedule**

- Pay will be aligned with the academic calendar.
- Normal benefits deductions will be withheld from paychecks during the fall semester.
- In addition to normal deductions, pre-collected benefits deductions will be withheld from six paychecks beginning in the spring to pay for benefits coverage during summer months.
- No benefits deductions will be withheld from summer pay for variable positions, provided prior deductions were paid; other classifications may have benefits deductions withheld.
- Mandatory retirement contributions (i.e., ASRS, ORP Fidelity or ORP TIAA) will be withheld from summer pay for those with variable positions.
- Voluntary retirement contributions (i.e., 403(b) and 457(b)) may be withheld from summer pay if earnings are sufficient to withhold the full dollar amount. If earnings are insufficient, no contributions will be withheld.
- Voluntary deductions (i.e., credit union and United Way) may be withheld from summer pay for those with variable positions.

**Option II: Fiscal Pay Schedule**

- Each bi-weekly paycheck is equal to 1/26 of the academic year salary.
- Deductions are taken equally from 26 bi-weekly paychecks.
- Employees with January 1 start dates are eligible to elect this option.

**Exceptions:** You are not eligible for Option II if:

- You are receiving pay for less than two semesters;
- You are employed at less than .50 FTE; or
- Your pay status changes to less than two semesters or your FTE falls below .50.

**Important:** In the event of separation from employment between July 1 and the end of the summer semester, faculty and academic professionals will be responsible for the repayment of salary received for the next academic year. Benefits will be terminated the pay period following notification.

**Questions?** Call HR Faculty Services 480-727-9900 or send email [HRESC@asu.edu](mailto:HRESC@asu.edu)

**I authorize payment of my academic contract as specified below.**

Name (print) \_\_\_\_\_ ASU Employee ID \_\_\_\_\_

Department Name \_\_\_\_\_ Department Code \_\_\_\_\_

Change is effective in fiscal year \_\_\_\_\_

Option I Academic Pay Schedule

Option II Fiscal Pay Schedule

Signature \_\_\_\_\_ Date \_\_\_\_\_