

# EMPLOYEE RECOGNITION AWARD REQUEST

(Revised 6/19)

Complete all information below and submit it for necessary approvals.  
Upon approval forward the original form to the Department of Human Resources.

Employee & Department Information		
Banner Fund and Org	Division	Department
Last, First Name MI	RU ID Number	Position Number/Title
Employment Type (Check One)		
<input type="checkbox"/> Classified Staff <input type="checkbox"/> AP Faculty <input type="checkbox"/> T&R Faculty <input type="checkbox"/> Adjunct Faculty <input type="checkbox"/> Wage <input type="checkbox"/> Student Employee		
Recognition Award Information		
Type of Recognition Award (Check and Complete One) <input type="checkbox"/> <b>Monetary Award<sup>1*</sup></b> > Amount: \$ _____ If Cash-like Monetary Awards (Check and Complete One) <input type="checkbox"/> RU One Card Credit <sup>2</sup> <input type="checkbox"/> Gift Card/Certificate <sup>2</sup> > Unique Number: _____ <input type="checkbox"/> Other (Specify): > _____  <input type="checkbox"/> <b>Nonmonetary Award<sup>3</sup></b> > Approximate Value: \$ _____ > Description of Award: _____  <input type="checkbox"/> <b>Recognition Leave<sup>4</sup> (Classified Staff Only)</b> > Number of Hours Awarded _____		Type of Recognition Program (Check One) <input type="checkbox"/> Immediate Recognition <input type="checkbox"/> Planned Recognition
		Total Given/Awarded to This Employee Fiscal YTD (7/1-6/30)      Leave YTD (1/10-1/9) Monetary & Non-Monetary      Recognition Leave Hours (Cannot Exceed \$2000)      (Cannot Exceed 40) \$ _____      _____ hours
		Describe the Reason for Recognition (Attach Additional Pages if Necessary)
*For monetary awards, budget must be available in account code 611312 (Employee Recognition Awards) prior to submitting this form to Human Resources. If this form is processed and funds are not available, the Budget Office will report it as a negative budget variance. Budget Managers have access to transfer funding to this account.		

### Required Signatures For Approval

Supervisor/Requestor Signature	Printed Name	Date
Dean, Director or Department Head Signature (Supervisor if recipient is Dean, Director or Department Head)	Printed Name	Date
President, Provost or Vice President (only for cumulative immediate recognition monetary/nonmonetary awards exceeding \$250 in a fiscal year or 16 hrs. of recognition leave in a leave year)	Printed Name	Date
Human Resources Signature	Printed Name	Date

<sup>1</sup>Monetary Awards paid through Payroll will be included in a single check with regular pay and are taxed at the supplemental rates which are 22% federal and 5.75% state and are also subject to social security and Medicare taxes which total 7.65%.  
<sup>2</sup>Gift cards/certificates and RU One Card Credits are monetary awards, taxes are withheld in next available paycheck and award is added to gross income.  
<sup>3</sup>Nonmonetary Awards received during a calendar year that total more than \$100, the entire amount is taxable and subject to tax withholding at the supplemental rate.  
<sup>4</sup>Recognition Leave expires 12 months from the date it was awarded. Recognition Leave is keyed into Banner Leave Reporting Module by Human Resources. Unexpired recognition leave is paid with an employee leaves the University. Only Classified Staff are eligible for Recognition Leave.