

# ACADEMIC NINE-MONTH *PRORATE* AUTHORIZATION FORM

## --- AUTHORIZATION ---

I hereby authorize SIU HR Data Control to prorate my academic nine-month salary over twelve equal installments, **effective August 16th** of the Academic Year noted below, and continue each year thereafter, until I revoke this election or separate from service. I understand that changes in my contract during an Academic year can cause my paycheck to no longer qualify for the prorated schedule.

AIS/Emp #: \_\_\_\_\_  
(or Last 4 of SSN if new employee)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

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

Academic Year: 20 \_\_\_\_\_ / 20 \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

To discontinue prorate, the employee must execute and submit a revocation of election form to HR Data Control before the beginning of the academic year for which the prorate is no longer desired. The revocation of an election to prorate will be effective for all future academic years or until the employee files a new election form.

\_\_\_\_\_  
Complete the form, sign, and forward to: Human Resources MC: 6520, Email to [hinfo@siu.edu](mailto:hinfo@siu.edu) or Fax 618-453-2038