

**DIVISION OF SOCIAL SCIENCES**  
**FACULTY SALARY EXCHANGE PROGRAM REQUEST FORM**

Requests must be received by the Dean's Office, [dssodoi@ucsd.edu](mailto:dssodoi@ucsd.edu), at least **thirty (30) days** prior to the effective date of the Faculty Salary Exchange Program (FSEP). Effective start date is always the first day of the month.

Faculty may pay a portion of their academic year salary on extramural funds. The resulting salary savings are retained by the department and distributed according to departmental policy.

Funds allocated to the participant must be used by the faculty member for research and administrative expenditures allowable on state funds.

Participation in the program should in no way reduce the teaching and service commitment of the faculty member.

Today's Date: \_\_\_\_\_ Department: \_\_\_\_\_

Employee Name: \_\_\_\_\_  
(LAST NAME, First Name)

Payroll Title: \_\_\_\_\_

Department Contact/Preparer: \_\_\_\_\_  
Please print name and extension

Employee Signature: \_\_\_\_\_  
Date

Departmental Chair Signature: \_\_\_\_\_  
Date

Pay Period of Funding Exchange (Must coincide with monthly pay periods):

If the time frame for FSEP is less than 12 months, faculty member understands and includes a statement in request that: Due to 9/12 pay cycle, this effort will actually be performed from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ and equates to \_\_\_ person months effort devoted to this project.

Begin: \_\_\_\_\_ End: \_\_\_\_\_

Description of Salary Exchange (Attach separate sheet if necessary): *Enter explanation below.*

Please list the current method of pay:

Index(s): \_\_\_\_\_

Fund(s): \_\_\_\_\_

Percent: \_\_\_\_\_ Total%: \_\_\_\_\_

Proposed Method of Pay:

Index(s): \_\_\_\_\_

Fund(s): \_\_\_\_\_

Percent: \_\_\_\_\_ Total%: \_\_\_\_\_

Dean Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Executive Vice  
Chancellor Approval: \_\_\_\_\_ Date: \_\_\_\_\_