

Summer Compensation:
Exception request to receive >2.5 months against sponsored awards
(Requests should be submitted to summercomp.provost@yale.edu)
(Subject: Permission to receive # months of summer compensation charged to sponsored awards)

*Exception Requests and Approval must be complete **prior** to exception occurring.*

Requestor Name:
Department:
Faculty Name:

Lead Admin Contact Name:
FRMS Contact Name:
Additional Contacts if needed:

Requesting permission to receive _____ months of salary for summer charged to sponsored awards.

Enrolled in the 9 over 9 program? Yes: ___ No: ___ Other: ___

Dual Appointment? Yes: ___ No: ___

Are you able to meet the expectation of the award using effort in the academic year instead of needing an exception for summer effort? Yes: ___ No: ___

Explanation:

Details on why an exception for summer compensation is needed: (Ex. Award is ending in October, maxed out on academic effort, need one-time exception)

Attestation:

I am verifying I have requested this exception to meet my current effort commitments to sponsors.

Working with FRMS, I have reduced my effort commitments within the percentage allowable for both the academic and summer periods. Further reductions will exceed the level of effort committed to my awards and would therefore be considered a significant reduction requiring prior approval from the sponsor.

In requesting this exception for summer salary from non-university (external) sponsored research funds, I agree that I will not be:

- carrying out activities inconsistent with the effort defined for sponsored project(s);
- performing significant administrative activities (e.g., departmental, University, national, editorial);
- taking more than minimal time away; teaching or preparing for teaching.

I am verifying that I understand that this exception for above 2.5 months (2 months for Dual) needs to be provided and approved before the certification of summer month effort.

Faculty Name:	Faculty Signature:	Date:
Dept. Chair Name:	Dept. Chair Signature:	Date:
Provost Name:	Provost Signature:	Date: