

COLLEGE OF CHARLESTON FOUNDATION NON-STATE PAY FORM

In order to pay an individual any salary, stipend or honorarium, please follow the directions below:

(Reimbursements should continue to use the "College of Charleston Foundation Designated Fund Accounts Check Request" form).

1. If recipient is a STATE OF SOUTH CAROLINA EMPLOYEE, do not use this form. A "Request for Additional Pay" (RAP) form must be completed and routed to the Foundation.

After Foundation approval, the RAP form will be forwarded to Human Resources. The appropriate taxes, withholding, retirement, etc. will be deducted. The College, not the Foundation, will then issue a check to the recipient.

Exception: Faculty/staff awards and reimbursements are exempt. Please complete the regular "College of Charleston Foundation Designated Fund Accounts Check Request" form and note which award is being presented.

2. If recipient is not a STATE OF SOUTH CAROLINA EMPLOYEE, have the recipient certify by signing below. Attach this form to a completed "College of Charleston Foundation Designated Fund Accounts Check Request" form. Both forms must be routed to the Foundation.

I certify that I am not a State of South Carolina Employee and, therefore not subject to the South Carolina Dual Employment Policy.

Signature

Date

Print Name

SSN: _____

Home Mailing Address: _____

Home Phone No.: _____

Email Address: _____