# Escalation Questionnaire for Prior Year Request for Summer Salary Payment

Instructions: Complete all required fields and attach this form, along with any necessary supporting documents, to your submitted Summer Salary request.

## Justification for Late Submission

#### **Reason for Late Submission**

Explain why this request was not submitted within the approved deadlines for Summer Salary Payment. (Attach additional pages if necessary.)

## **Funding Verification**

#### **Supporting Documentation**

Attach substantiating proof that funds were active and available for the requested late summer salary period.

□ Documentation attached

## Effort Reporting Compliance (PPFM Review)

(Required if Summer Salary Payment has already been certified for a prior reporting period)

#### **Faculty Statement on Discrepancy**

If the Summer Salary Payment was previously certified, explain the discrepancy and how it will be corrected in the amended Effort Report.

# Certifications

### **Research Administrator Certification**

(RA Signature required for requests involving GNT, CNT, NBA)

By signing below, I confirm that I have reviewed this request and verified that the funding source can cover the Late Summer Salary Payment in compliance with sponsor reporting requirements.

RA Name: \_\_\_\_\_

RA Signature: _	Dat	e:
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## School Finance Office Certification

(School Financial Office representative signature required for all other projects, including start-up fund requests)

By signing below, I confirm that I have reviewed this request and verified that the funding source can cover the Late Summer Salary Payment and compliance with any funding limitations.

School Finance Office Representative Name: \_\_\_\_\_

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

## **Final Review and Determination**

	Controller/VC CFO Decision	□ Approved	□ Declined
Ratio	onale:		
	Controller/VC CFO Name:		
	Signature:	Date:	