

Instructions

- You must have a budget line that will support this request
- This form must be filled out completely
- Excess Pay request must be approved by Student Employment Services before hire is entered into system and student(s) begins work
- Once Excess pay is approved, and the hire is entered into the system, all new student employees must report to Marquette Central on their first day of employment to complete their I9, W-4 Tax Withholding Certificate and OSHA paperwork
- Excess Pay form is **valid for this student, for this hire, and for the START and END dates entered within one academic year**. Note: the END date may not be later than the last day of the academic year calendar or the summer calendar of the current year
- Time sheets must be approved via EmpCenter according to the Student Employment Payroll calendar

Guidelines

Work that consistently requires advanced specialized knowledge, skills, and/or requires experience, and/or requires other employee qualities that are in extremely limited supply.

Skill Level:

- Supervise/lead others in work (more than 3 people, more than 50% of the time)
- Accountable for work performed by others
- Consequence of error is severe, correction is difficult or not possible
- No review of work except when initiated by worker or general performance review
- Scope of job is across and/or beyond institution
- Rare skill, technical knowledge or experience

OR

- Graduate Student required for job with duties in teaching, administration or advanced discipline, skill or knowledge
- Rate of Pay is determined by Grant Account

Excess Pay Request



Marquette Central
Zilber Hall, Suite 121
PO Box 1881
Milwaukee, WI 53201-1881
Email: marquettecentral@marquette.edu
Website: marquette.edu/mucentral/
Tel: (414) 288-4000 Fax: (414) 288-1718

To be completed by Employer		
Department:		Date:
Period of Employment (Start Date):		(End Date):
Name of Student:		MUID:
Grade/Wage Level:	Job ID Number:	Amount of Excess Pay:
Description of Duties:		
Specific job requirements which warrant Excess Pay:		
Authorized Signature (Chairperson, Director, etc.):		
Supervisor:		Telephone:
Address:		

To be completed by Student Employment Services	
<input type="checkbox"/> Request Approved	<input type="checkbox"/> Request Denied
Student Employment Coordinator Signature:	Date: