

**LSU PROFESSORSHIP AWARD SELECTION****Title of Professorship:** Donald W. and Gayle A. Keller Distinguished Professorship**Employee Name:** Seung Kam**Position ID #:** P00004755 **Department:** PETE**Review Date of Financial:** 7/1/2018 - 6/30/2019 **Project #:** 101691Estimated level of funding available for use during 7/1/2018 - 6/30/2019 is \$ _____. Please select the 127-45-6145 | BG002984: \$2,500
127-45-7145 | BG002999: \$ 2,500

form(s) of monetary consideration by indicating the percentage (round to the nearest whole number) next to each form of support. The percentages must add up to 100%.

Percentage **Form of Monetary Consideration**

____% Summer Salary

- For chair/professorship-related activities performed during the summer months by holders appointed on an academic year (9 month) pay basis and the amount may not exceed 3/9 of AY base pay, subject to the limits established by PS-43.
- Fringe benefits are paid. Retirement contributions are made. Therefore, the amount of dollars available to be paid is reduced.
- Object code 1060

100 %

Temporary Salary Supplement

- Holder is appointed for a limited period and is not assigned specific duties.
- This is not subject to retirement contributions, nor are they pensionable.
- Object code 1090

____%

Additional Compensation

- Specific additional duties associated with the title
- Fringe benefits are paid. Retirement contributions are made. Therefore, the amount of dollars available to be paid is reduced.
- Object code 1060
 - Temporary additional duties during AY or FY
- Object code 1050
 - When additional duties are performed throughout the AY or FY it may be paid as an administrative salary supplement.

____%

Support for Expenditures

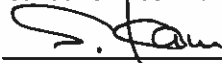
- Funds available for discretionary use for professional development and research purposes in accordance with University and/or Foundation regulations.

Employee Acknowledgement

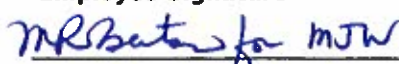
I understand that:

- This selection results in no change in base pay.
- This selection must be in compliance with the donor agreement.
- Income tax is owed on all monetary consideration except Support for Expenditures.
- The amount paid may vary from year to year, depending on earnings of the endowment classified by the LSU Foundation as available for spending.

I understand that the estimated level of monetary consideration is committed to me for only one year based on currently available earnings. As the recipient, I recognize that, subject to consent by the University, the LSU Foundation has final approval of the method selected for utilization of professorship funds.

 9/19/2018

Employee Signature **Date** 9/18/2018

Department Chair **Date** 9/18/18

Dean **Date**_____
Vice Provost **Date*****Balances listed above were updated on _____. Please note, these balances may have changed.**

**LSU PROFESSORSHIP AWARD SELECTION****Title of Professorship:** Donald W. and Gayle A. Keller Distinguished Professorship**Employee Name:** Seung Kam**Position ID #:** P00004755**Department:** PETE**Review Date of Financial:** 7/1/2018 - 6/30/2019 **Project #:** 101691

Estimated level of funding available for use during 7/1/2018 - 6/30/2019 is \$2,945. Please select the form(s) of monetary consideration by indicating the percentage (round to the nearest whole number) next to each form of support. The percentages must add up to 100%.

Percentage Form of Monetary Consideration

____ %

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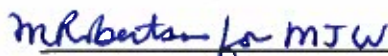
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Employee Signature9/19/2018
Date
Department Chair9/18/2018
Date
Dean9/18/18
Date

Vice Provost

Date

*Balances listed above were updated on 8/23/18. Please note, these balances may have changed.