

MICHIGAN STATE UNIVERSITY

OFFICE OF THE CONTROLLER • TELEPHONE (517) 355-5020
JOHN A. HANNAH ADMINISTRATION BUILDING

EAST LANSING • MICHIGAN • 48824

June 30, 1982

MEMORANDUM

TO: Deans, Chairpersons, Directors and Department Heads

FROM: Lowell E. Levi, Controller *LEL*

SUBJECT: ANNUAL UPDATE TO THE MSU MANUAL OF BUSINESS PROCEDURES

The 1982 revisions to the Manual of Business Procedures are enclosed. Pages referenced below (dated June 30, 1982) should be substituted for corresponding pages dated earlier.

A brief explanation of the changes follows:

VOLUME I:

- Section 16 - Addition of information regarding service charge for checks returned by a bank.
- Section 35 - Section revised.
- Section 40 - Section revised. Form CO-bo-15d will be available in the near future. In the meantime, use form CO-bo-15c. Section 12, which is referenced on page 40.1, will be included in a future update to the Manual.
- Section 47 - A direct payment voucher must be submitted for payment of membership dues.
- Section 55 - Changes relate to the new bi-weekly payroll for clerical-technical employees effective July 1, 1982, the revised W-4 form (Employee's Withholding Allowance Certificate), direct deposit procedures, and change of name and/or address. Please note that not all pages in this section have been revised. Also, discard pages 55.26 and 55.27 dated 5-31-81.

VOLUME II:

- Table of Contents - Addition of Section 236, "Library - Database Searching Services."
- Section 200 - Department name change from Office of the University Architect to Facilities Planning and Space Management.
- Section 210 - Addition of "Signature Digitization" and "Long-Term Retention Tape Files" to the section and other revisions.
- Section 235 - Section revised.
- Section 236 - New section.
- Section 240 - Revised instructions for requesting Mail Distribution Labels.
- Section 275 - Page 275.1 was revised, and page 275.2 should be discarded.
- Section 285 - Section revised.

ANNUAL UPDATE TO THE MSU MANUAL OF BUSINESS PROCEDURES

June 30, 1982

Page 2

Section 305 - Signature of Dean of the Graduate School on fellowship or traineeship appointment form is no longer required.
Remove page 305.4 (Appointment Recommendation of Undergraduate Trainees form) as it is obsolete.

To keep the procedures included in the Manual current, we need input from all units within the University. Any changes, additions or deletions should be forwarded to the Office of Financial Analysis, 394 Administration Building for inclusion in the next update.

Questions on content or distribution should be directed to the Office of Financial Analysis, 355-5026.

ts

Enclosures

MANUAL OF BUSINESS PROCEDURES - VOLUME I

Michigan State University

Table of Contents

CONTROLLER'S OFFICE

<u>Section Name</u>	<u>Section #</u>
Accounting for Departmental Transactions	1
Account Numbers and Account Requests	5
Accounts Receivable	10
Cash Handling	15
Check Cashing	16
Encumbrance Adjustments	18
Expenditure Codes (see Section 65 for Revenue Codes)	20
Field Trips	25
Identification Cards	30
Insurance and Risk Management Department	35
Journal Entry Requests	40
Lost, Stolen or Destroyed Checks	43
Expenditure Policies and Guidelines for Food, Lodging and Beverages	45
Membership Dues	47
Michigan Sales and Use Tax	50
Payroll Department	55
Petty Cash Funds	60
Revenue Codes (see Section 20 for Expenditure Codes)	65
Signature Requirements	66
Travel Advances, Procedures for Processing	70
Invoice Processing System	74
Vouchers	75

CHECK CASHING

The Cashier's Office, 110 Administration Building will cash checks in the amount of \$100 or less under the following guidelines:

- A. This service is available to all persons with a current validated University ID card.
- B. No more than one check per person per day may be cashed.
- C. There will be a charge of 50¢ for each check cashed.
- D. No two party checks will be cashed except checks received by students from their parents with an amount of \$100 or less.
- E. No checks presented by students drawn on banks located in Lansing or East Lansing will be cashed during the period between May 15th and the first day of classes for Summer School.
- F. A service charge of \$8 will be assessed for any check returned for any reason other than a bank error.

INSURANCE & RISK MANAGEMENT DEPARTMENT

I. ADMINISTRATION AND FUNCTION

- A. The Insurance and Risk Management Department, Office of the Controller, located at 372 Administration Building, Telephone (517) 355-5022 is charged with the responsibility for the management of the University's risk management programs relating to property and liability exposures. It is also charged with the administration of self insured funds and the procurement of all property and liability insurance deemed prudent to protect the University's interests and with the administration of the programs and policies relating thereto. The Insurance and Risk Management Department is also charged with the responsibility to coordinate the activities of the Quality Assurance & Risk Management Program related to the medical services and to serve on all primary Risk Management and Quality Assurance Committees as an ex-officio member.
- B. The descriptions of the insurance coverages afforded by the policies in force are of necessity herein stated in general terms as the provisions of the policies are complex and often can be interpreted only with reference to specific circumstances. Inquiries should be made directly to the Insurance and Risk Management Department.

II. PROPERTY INSURANCE

The University carries insurance to protect its real and personal properties against the perils of fire, windstorm, explosion, vandalism,

(INSURANCE & RISK MANAGEMENT DEPARTMENT CONT.)

sprinkler leakage and various other exposures.

A. Reporting Losses

1. Losses must be immediately reported by telephone by the chairperson, director or authorized representative to the Department of Public Safety, telephone 355-2221 followed by a written report outlining circumstances of loss, date of loss, building and room number, steps taken to recover property, and complete description of missing or damaged items.
2. Copies of the above written report should be mailed to the Inventory Department, Building 3 General Stores, and the Insurance and Risk Management Department, 372 Administration Building.

B. Prevention - There are many departments prepared to assist the chairperson, director, manager or supervisor in reducing the loss potential. These include Safety Services, Fire Safety or Safety Equipment, telephone 353-5360, Public Safety, telephone 355-2221, and the Insurance and Risk Management Department, telephone 355-5022.

C. Security

1. To achieve the highest degree of security, valuable equipment must be stored in secure areas, duplicate copies of valuable records should be made and stored in remote locations, and areas open to the public should be under surveillance at all times where there is a loss potential.

(INSURANCE & RISK MANAGEMENT DEPARTMENT CONT.)

2. Key control, identification, secure storage of purses and personal belongings and other aspects of security need to be considered. The Department of Public Safety can provide assistance to you in improving security.
- D. Equipment Taken Off Campus - University policy stipulates that equipment cannot be taken off campus. Any exception to this policy can only be made with the approval of the department chairperson, director or administrative head prior to written approval of the Secretary to the Board of Trustees.

III. LIABILITY INSURANCE

- A. The University and persons acting, or deemed by the University to be acting, within the scope of their duties or while performing services on behalf of or under the direction of the University are covered by the University's Comprehensive General Liability policy.
- B. Coverage provided is for payment of all sums including defense costs, for which the University and covered persons become legally liable to pay because of bodily injury to a third person, personal injury (i.e.- libel, slander or defamation of character) or damage to property of others arising out of the operations of the University.
 1. Reporting Accidents or Incidents
 - a. Accidents/incidents which take place on the MSU campus or involve MSU personnel that results in, or may give rise to claims of bodily injury, property damage or personal injury must be reported to the Department of

(INSURANCE & RISK MANAGEMENT DEPARTMENT CONT.)

Public Safety and to the Office of Insurance and Risk Management Department.

- b. If the accident/incident takes place off campus, the MSU employee must report the accident/incident to the Insurance and Risk Management Department as soon as possible. A copy of the local police or investigators report should also be forwarded whenever available.
2. Prevention - Every chairperson, director, supervisor or or manager of a unit must make every effort to assure that working conditions are as safe as possible, physical facilities are free of unguarded hazards, and usage or storage of hazardous materials are rigidly controlled.
3. Safety Inspections
 - a. The Department of Public Safety is responsible for compliance with safety regulations and practices within University facilities. They will conduct periodic inspections of all facilities and will also participate in inspections made by external insurance carriers and other State or Federal agencies. Preference will be given to facilities known to have high potential risk factors.
 - b. The Department of Public Safety will issue a report for every facility inspected indicating corrections needed and poor safety practices, based on current fire and MIOSHA regulations. Copies of Inspection Reports will be sent to the Department inspected or other responsible

(INSURANCE & RISK MANAGEMENT DEPARTMENT CONT.)

units as noted below and to the University Insurance and Risk Manager.

- c. The Department of Public Safety will designate these deficiencies by four (4) groups, as follows:
 - 1. Housekeeping & equipment deficiencies
 - 2. General building maintenance & repair
 - 3. Building deficiencies, alterations, etc.
 - 4. Grounds maintenance & repair.
- d. Responsibility for correcting deficiencies noted in the Inspection Report will be assigned by the Department Public Safety as follows:
 - 1. Housekeeping deficiencies in classrooms, lecture halls and seminar rooms - Facilities Planning & Space Management. (Housing and Food Services will be sent a copy of recommendations which pertain to academic space in the residence halls, Kellogg Center or the Union Building.) ;
 - 2. Departmental housekeeping and equipment deficiencies - Department Chairperson or Director;
 - 3. General building maintenance and repair items for campus buildings (except Housing and Food Services' facilities) and utilities - Assistant Vice President for Physical Plant; and

(INSURANCE & RISK MANAGEMENT DEPARTMENT CONT.)

4. Building deficiencies and necessary alterations (except) Housing and Food Services' facilities) - Facilities Planning & Space Management.
- e. Recommendations for correcting deficiencies in Housing and Food Services' facilities, Grounds, University Farms and Off-Campus property will be submitted as follows:
 1. Housing and Food Services reports - Assistant Vice President for Housing and Food Services;
 2. Grounds maintenance and repair reports - Grounds Director;
 3. University Farms reports - Superintendent of University Farms; and
 4. Off-Campus Property reports - Director of Land Management.
- f. Within two weeks after receipt of a Safety Inspection Report, the unit will prepare and submit a response to the Director of Safety, Department of Public Safety with a copy to the Insurance and Risk Manager, giving comments, proposed course of corrective action, and the time frame in which corrective action will be taken. IT IS THE RESPONSIBILITY OF THE UNIT RECEIVING THE RECOMMENDATION TO TAKE CORRECTIVE ACTION.

When the unit lacks adequate funding, request should be made through normal administrative channels in order of priority.
- g. The Department of Public Safety shall conduct follow-up investigations to insure that corrective actions have been accomplished. The Department of Public Safety will recommend to the Vice President for Administration &

(INSURANCE & RISK MANAGEMENT DEPARTMENT CONT.)

Public Affairs , or his/her designee, that the operation be closed if, in their judgment the hazards could result in severe injury or death to students, employees, or visitors.

IV. INSURANCE ON VEHICLES

A. University-Owned Vehicles

1. The University carries bodily injury and property damage insurance to cover the University's legal liability.
The University and its authorized driver are covered in the event of negligence resulting in the damage to property of others or bodily injury to third parties within the limits of the Michigan No-Fault Act.
2. The University does not carry collision insurance to cover damage to University-owned vehicles.
3. Damage to University vehicles owned by departments is the responsibility of the department. A portion of the cost of repairs to a Motor-Pool-owned vehicle is charged to the department using the vehicle when the damage occurs.

B. Privately-Owned Vehicles

1. The University does not carry property damage or personal liability insurance for the protection of the owner of a privately-owned vehicle.
2. Those using privately-owned vehicles on University business trips should carry insurance in an amount that will cover their legal responsibility.

(INSURANCE & RISK MANAGEMENT DEPARTMENT CONT.)

C. Qualification of Drivers

1. A person driving a University-owned vehicle must have a valid U. S. or Canadian driver's license, must be experienced in handling the type of vehicle requested, and must have a satisfactory driving record. The responsibility for enforcing these requirements rests with the Department Chairperson.
2. Graduate assistants may be assigned and drive University vehicles on authorized trips. Students (except graduate assistants) may drive only if they are accompanied in the same vehicle by an employee to whom the vehicle is assigned or if a special request for authorization to drive has been filed by the Department Chairperson and approved by the Director of Budget and Planning. A copy of the approved authorization should then be sent to the Insurance and Risk Management Department.

D. Passengers - Unauthorized persons are not permitted to ride in University vehicles.

E. Reporting Accidents

1. The driver of an MSU vehicle involved in an accident must immediately report the accident to the Police Department in the enforcement jurisdiction.
2. Driver of the MSU vehicle, or an authorized representative of the Department, must fill out form No. Z43D0080, "Michigan State University Automobile Accident or Loss Notice Report."
(See page 35.11 and 35.12)

This form may be found in the glove compartment of each MSU

(INSURANCE & RISK MANAGEMENT DEPARTMENT CONT.)

vehicle or obtained from the Insurance and Risk Management Department, 372 Administration Building, (355-5022).

3. The Automobile Accident or Loss Notice Report form must be delivered to the Insurance and Risk Management Department on the day of the accident or as soon as practicable thereafter.
4. Drivers of MSU vehicles involved in accidents should make every effort to obtain the name, address and telephone number of insurance companies or agents covering the other vehicles involved.
5. Accidents involving injuries should be reported at once by telephone to the Insurance and Risk Management Department, 355-5022, 8:00 a. m. - 12:00 noon and 1:00 p. m. - 5:00 p. m. Monday through Friday and, The Department of Public Safety, telephone 355-2221 at all other times.
6. Accidents involving injuries to employees should also be reported to the Workers Compensation Office, telephone 353-5394.
7. Proof of insurance coverage for University-owned vehicles may be ordered from the Insurance and Risk Management Department.

V. PROFESSIONAL LIABILITY PROTECTION

- A. MSU employees who are working within the scope of their duties and students and volunteers who are performing services on behalf of or under the direction of the University are covered by the University's professional liability self insured fund.
- B. Coverage is provided for the rendering of or failure to render professional services.

(INSURANCE & RISK MANAGEMENT DEPARTMENT CONT.)

VI. TRAVEL ACCIDENT INSURANCE

Michigan State University carries a blanket travel accident policy on all employees who suffer accidental death or dismemberment while traveling on University business.

VII. ADDITIONAL INSURANCE

- A. Additional or supplemental insurance purchased by University departments, regardless of the source of funds, may duplicate existing protection and result in inherently unequal University-paid insurance coverage between units and employees. Therefore, no insurance policy of any kind may be purchased directly with any insurance carrier by a University department. All existing policies purchased by departments with University funds should be allowed to expire at the end of the current policy year and should not be renewed.
- B. Should exceptional circumstances indicate additional protection is desirable, a request for property or liability insurance must be made to the Insurance and Risk Management Department. A request for life, medical and disability insurances must be made to the Office of Employee Compensation and Benefits.

Form No.
Z43D0080

MICHIGAN STATE UNIVERSITY
AUTOMOBILE ACCIDENT OR LOSS NOTICE REPORT
Bodily Injury — Property Damage to Others — Damage to MSU Vehicle

1. MSU VEHICLE DESCRIPTION

MSU Vehicle No.	Year Model	Make	Body Style	Registration No.	Motor Number	Serial Number
Purpose for which car was being used						

2. DATE, TIME, PLACE OF ACCIDENT — MSU DRIVER

Date	Hour	City	State	Location (Street, intersection, etc.)		
Name of MSU Driver			Date of Birth		Campus Telephone No.	Department
Driver's License No.		Home Address: Number Street City State				
Employee Status	<input type="checkbox"/> Regular <input type="checkbox"/> Grad. Asst.	<input type="checkbox"/> Other (Specify)				
Was accident reported to the police? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Where?						
Was a citation issued? <input type="checkbox"/> Yes <input type="checkbox"/> No To whom?						

3. PERSONS INJURED (Additional space on reverse side - if needed)

Name	Address	Age
Injuries		
<input type="checkbox"/> MSU Car <input type="checkbox"/> Other Car <input type="checkbox"/> Pedestrian		Attended by
		Where taken after accident?

4. DAMAGE TO PROPERTY OF OTHERS

Nature and extent of damage		Estimated cost of repairs
Name of Owner	Address of Owner	
Name of Driver	Address of Driver	
If automobile year, model and make		Body Style
		Registration Number
Name of Insurance Company		Address of Insurance Company

5. DAMAGE TO MSU VEHICLE

Nature of loss	Estimated cost of repairs
When and where can car be inspected?	

PLEASE GIVE INFORMATION REQUESTED ON REVERSE SIDE

Complete one copy and deliver to the Insurance & Risk Management Department
Rm. 372 Administration Bldg.

6. NAME & ADDRESSES OF OCCUPANTS & WITNESSES

Occupants of MSU Car		Address	Telephone No.
a			
b			
c			
Occupants of Other Car		Address	Telephone No.
a			
b			
c			
Other Witnesses		Address	Telephone No.
a			
b			
c			

7. CONDITIONS OF ROAD AND WEATHER

WEATHER <input type="checkbox"/> Clear <input type="checkbox"/> Rain <input type="checkbox"/> Fog <input type="checkbox"/> Snow	LIGHT <input type="checkbox"/> Day <input type="checkbox"/> Dark <input type="checkbox"/> Dawn Dusk <input type="checkbox"/> Street Lights	ROAD SURFACE <input type="checkbox"/> Dry <input type="checkbox"/> Snowy <input type="checkbox"/> Wet <input type="checkbox"/> Icy <input type="checkbox"/> Muddy <input type="checkbox"/> Slushy	ROAD CONDITION <input type="checkbox"/> Engineering <input type="checkbox"/> Maintenance <input type="checkbox"/> Construction Zone	TOTAL LANES <input type="checkbox"/> Divided <input type="checkbox"/> Limited Access
--	---	--	---	---

8. SHOW HOW ACCIDENT OCCURRED BY USING THIS DIAGRAM (Give street names, directions & locations of objects involved):

Accident Description and Remarks:

9. ADDITIONAL PERSONS INJURED

Name	Address	Age
Nature of Injuries		
<input type="checkbox"/> MSU Car <input type="checkbox"/> Other Car <input type="checkbox"/> Pedestrian	Attended By	Where taken after accident?

Signature of Insured or Driver

Date of this report _____ 19 _____

Claim No. _____

INCIDENT REPORT
MICHIGAN STATE UNIVERSITY

(For non-employees-not to be used for injuries to employees)

<u>PERSON INJURED</u>			
Name _____	Telephone _____		
Address _____	City _____	State _____	Age _____
Type of injury _____			

<u>DETAILS OF ACCIDENT</u>	
Type of Accident _____	Police Dept. reported to _____
Date _____	Time _____ a.m. p.m.
Location (bldg., city, state, be specific) _____	
Condition of premisis (i.e. wet, uneven..) _____	
Probable cause of injury _____	
Remarks _____	

<u>PROPERTY DAMAGE/LOSS</u>	
Damage to property of others: yes _____ no _____	Estimated cost of repair/replacement _____
Nature & extent of damage _____	
Property type _____	Where can property be seen? _____
Name of Owner _____	
Address _____	City _____ State _____ Telephone _____
Remarks _____	

<u>WITNESSES</u>		
Name _____	Address _____	Telephone _____
Name _____	Address _____	Telephone _____

Date of this report _____ Signature of person making this report _____

Return completed form to: Insurance & Risk Management Title _____
372 Administration Building Telephone _____
Campus

If you have any questions regarding this form please call the Insurance & Risk Mgmt. Office at 355-S022.

JOURNAL VOUCHER ENTRIES

I. GENERAL

- A. A journal voucher entry may be prepared for either of the following reasons:
 - 1. To transfer or correct a previous revenue or expense transaction.
 - 2. To charge or pay for services rendered.
- B. Budget adjustments or reallocations should not be made on a journal voucher entry. See Section 12 for budget reallocation request procedures.
- C. The "Journal Voucher Entry" form, CO-bo-15d, is the proper form on which to submit journal voucher entries. An example is provided on page 40.4. You may obtain this form from the General Stores Department.
- D. The Journal Voucher Entry should be prepared in at least duplicate. Except as provided in I.E., the original should be sent to the Accounting Department, Controller's Office, Room 360 Administration Building. The second copy should be retained by the initiating department. If another department is impacted by the entry, an advice copy should be sent to them for their files. The advice copy should be clearly marked as a copy. This will help prevent it from being forwarded to the Accounting Department for processing.
- E. In the following instances, the Journal Voucher Entry should not be sent directly to the Accounting Department.
 - 1. All entries impacting General Fund salary accounts (11-1001 - 11-7991), should be routed through the Office of Planning and Budget for their review and approval.

(Journal Voucher Entries Cont.)

2. All entries which impact a research grant account (71-0100 - 71-5999), should be routed through the Office of Contract and Grant Administration for their review and approval.
3. All entries impacting salary accounts in the Agricultural Experiment Station or Co-operative Extension Service groups (71-6000 - 71-7999), should be routed through the College of Agriculture and Natural Resources Budget Office for their review and approval.

II. PREPARATION

- A. Provide a detailed explanation of the Journal Voucher Entry. The explanation should include the reason for making the entry, previous transaction document reference number(s) (CHK #, IDT #, CSH #, VOU #, JVE #, etc.), date(s) or period(s) covered by the entry and any other details needed for proper documentation. For services rendered, a description of the goods or services, the number of units sold and unit price are also needed. Journal voucher entries are subject to audit. Your explanation and documentation must be complete.
- B. Indicate department name(s), complete account number(s), object code(s) and dollar amount(s) for both the debit and the credit side of the entry. If additional space is needed, indicate "continued" on the bottom line and attach a second page. The lightly shaded areas in the body of the form are for Accounting Department use only.

(Journal Voucher Entries Cont.)

- C. In the grid at the bottom of the form provide in 19 spaces or less a description of the Journal Voucher Entry to appear on the monthly fund ledger. Because this is the only explanation that will appear on the fund ledger it should be self-explanatory. Vague descriptions, such as "transfer charges," are unacceptable.
- D. The Journal Voucher Entry must be signed by an authorized signer for at least one of the accounts impacted (see Section 66 for details on authorized signers).
- E. Date the Journal Voucher Entry, enter your departmental telephone number and distribute the entry as described in part I.D. and I.E.

JOURNAL ENTRY REQUEST

J.V.E. No. _____
(For Bookkeeping Use Only)

Date _____

TO: Bookkeeping Division, Office of the Controller
Room 360 Administration Building
Phone 5-5000Page: 40.4
Date: 6-30-82

Please make a journal entry involving the following described adjustment

Check Reason for Journal Entry Request and Provide Explanation

- | | |
|--|--|
| <input type="checkbox"/> To Correct Expenditures | <input type="checkbox"/> To Close Account |
| <input type="checkbox"/> To Correct Revenues | <input type="checkbox"/> To Cover Overdraft |
| <input type="checkbox"/> To Transfer Charges | <input type="checkbox"/> For Services Rendered |
| | <input type="checkbox"/> Other |

Explain adjustment in detail—provide date, period covered, type of expenditure or revenue, reference number, etc. An incomplete explanation will result in the return of this request for additional information.

EXPLANATION

Adjustment to be Made: Provide Complete Account Number, Including Object Code Classification

	Bkkpg. T.C.	Account Number	Object Code	Amount	B K K
Debit				\$	
Credit		Please note that form CO-bo-15d, which is referenced on page 40.1, is not yet available. In the meantime, use form CO-bo-15c shown here.			

Description To Be Put On Ledger _____
(limit to 19 spaces)Adjustment Requested by _____
Authorized Signature

MEMBERSHIP DUES

- I. UNIVERSITY POLICY - The University recognizes that memberships in professional organizations and associations may benefit faculty and staff members when carrying out their respective University responsibilities. Because of limited resources to carry out the mission of the University, funds are not available to pay all the numerous and various membership dues.

In view of the above, the following criteria must be met before membership dues to professional organizations or associations will be processed for payment using a direct payment voucher only:

- A. The payment of dues must be for an institutional membership and not on behalf or in the name of an individual faculty or staff member.
- B. Occasionally, it is necessary to pay nominal membership dues in order to obtain needed subscriptions. When subscriptions are for departmental use, the membership may be in the name of the chairperson or director of the department or school. Membership dues which are a substantial portion of the combined cost of membership and subscription will not be paid.
- C. The Medical Service Plan may continue to pay membership dues for MSP members as authorized by the respective college and/or department in accordance with provisions of the Plan.
- D. Under special circumstances, subscriptions or combined membership-subscription dues may be allowed on an annually approved basis if essential to a specific research project. This requires approval of the unit administrator and the dean (not authorized designates).

PAYROLL DEPARTMENT

I. UNIVERSITY PAYROLLS

A. Pay and Pay Dates

1. Academic and salaried non-academic employees - Employees under these classifications are paid on a monthly payroll ending the last day of the month. Paychecks are distributed on the last working day of the month.
2. Graduate Assistants - Graduate assistants are paid on a monthly payroll ending on the 15th of the month. Paychecks are distributed on the 15th of the month or on the last working day before the 15th.
3. Hourly employees - Hourly employees, which include clerical-technical, are paid on a bi-weekly payroll. Paychecks are distributed on the Friday following the pay period ending Sunday night.
4. Student employees - Student employees are paid in the same manner as Hourly employees except that the Student payroll date falls on alternate weeks.

B. Required Payroll Forms

1. Employee's Withholding Exemption Certificate
 - a. Form W-4, Employees Withholding Certificate must be filed by every employee. (See Sample, Page 55.17). Federal law requires that the employee must complete the form in its entirety.
 - b. The employee must file a new form W-4 each time the employee desires to increase or decrease the number of exemptions claimed or to have additional withholding per pay period.
 - c. Employees wishing to file a form CW-4, Withholding Certificate for City Income Tax, may do so in the Payroll Department. (See Sample, Page 55.18).

(Payroll Department Cont.)

2. Personnel Record Form - All academic employees and Graduate Assistants are required to complete the Personnel Record Form, Co-pa-4a. (See Sample, Page 55.19).
3. Where Required Forms are Available - The required form Co-pa-4a is available in the Payroll Department, Office of the Controller, 350 Administration Building, and must be filed in the Payroll Department before a check can be released.

C. Optional Forms

1. Direct Deposit Authorization:
Employees may have their paychecks directly deposited into personal checking or savings accounts by completing the Direct Deposit Authorization card (see Sample, Page 55.20). Employees who desire this service should also contact the financial institution advising them that their paychecks are to be direct deposited.
2. U.S. Savings Bonds:
Payroll deductions for United States Savings Bonds are available at the request of the employee. Authorized payroll deduction cards must be signed by the employee and filed in the Payroll Department.
3. Earned Income Credit Advance Payment Certificate:
Employees that meet certain requirements can receive the Earned Income Credit in advance during the year as they earn their income. To qualify for the credit, employees must expect their income (including spouse's income if married) to be less than \$10,000 for the year. They also must expect to claim an exemption for a child who will live with them. The Earned Income Credit can provide payments of up to \$500 in a year. Employees eligible for the advance credit should fill out Form W-5, Earned Income Credit Advance Payment Certificate, available at the Payroll Department, Room 350 Administration Building (see Sample, Page 55.25). The credit will be given on the annual tax return even if advance payment is not requested. The Form W-5 certificate expires on December 31 of each year.
4. Employees wishing to participate in employee benefit programs such as retirement, health, accident and life insurance, etc., should contact the Staff Benefits Office.

(Payroll Department Cont.)

D. Appointment and Hiring

1. Academic and Graduate Assistant Appointments

- a. All Academic and Graduate Assistant personnel must stop at the Payroll Department, 350 Administration Building as soon as possible after arrival on campus to complete all the required forms. Departments are requested to bring this to the attention of new staff members.
- b. All employees will be required to present their Social Security card when completing the Personnel Record and W-4 forms. Military draft cards will also be accepted in place of social security cards, but only these two documents are acceptable by Federal law.

2. Salaried Non-Academic and Hourly Employees - All employees under these classifications are hired through the Personnel Department where the required forms are completed and forwarded to the Payroll Department.

3. Student Employees

- a. Students are required to complete an "Employee's Withholding Allowance Certificate" Form W-4. (See Sample, Page 55.17). Employees who can qualify may take advantage of the exempt status by completing line "6" on the W-4 form. If an employee is claiming exemption from withholding and wishes to continue this status, the employee will have to file a new W-4 certificate between January 1 and February 15 of each year. The current amount of earnings exempt from withholding tax are published in the MSU Bulletin and the State News each year prior to expiration or may be obtained by calling Payroll and asking for "Current Federal and State Exempt Earnings Amounts" telephone 355-5010. Employees must revoke the Certificate of Exemption within ten days if it becomes reasonable for them to anticipate that they will have a tax liability during the current taxable year. This may be done by completing a new W-4 form using proper allowances and marital status.
- b. Departments are responsible for obtaining the completed form W-4 and must submit it to the Student Employment Office together with the employment application Form Z27D0010 (See Student Employment Office Section, Volume II).

(Payroll Department Cont.)

- c. University student employees retain the student status between terms until the degree sought is obtained.

E. Payroll Time Cards

1. Academic, Clerical-Technical, Salaried Non-Academic and Graduate Assistants.
 - a. Payrolls are prepared automatically from appointment and personnel forms.
 - b. Departments are responsible for reconciling all employees' time and any factors which would alter an employee's compensation, such as terminations, leave without pay or days lost without pay, should be reported to Personnel immediately.
2. Hourly Employees (excluding Clerical-Technical)
 - a. Form Required - "Daily Time Record" card.
(See Sample, Page 55.21).
 - b. Preparation of Form
 - 1) The first time card submitted for an employee, must have the complete name, social security number, account number, department and rate. The name must be the same as it appears on the employee's social security card. After an initial time card has been submitted for an employee, a prepunched time card will be returned to the department for submission with the next payroll. The department should review the prepunched information and if incorrect, make the necessary corrections on the time card. DO NOT write any information above the heavy black line.
 - 2) Record the detail hours or days worked. Fractional hours are to be rounded to the nearest tenth of an hour. For example, a person working 3 hours and 24 minutes or 3.4 hours.
 - 3) Add hours or days for the pay period and enter the total under "Total for Period" and "Time."
 - 4) Check the "Unit of Time," insert the rate and compute the gross earnings in the gross amount block (omit dollar signs). Complete the "From and To" dates in the pay period block.

(Payroll Department Cont.)

- 5) The card must have the handwritten signature of the unit administrator.

3. Student Employees

- a. Form Required - "Student Payroll Card."
(See Sample, Page 55.22).

- b. Preparation of Form

- 1) Preparation of student employee time cards is the same as for hourly employee time cards except that the student number is used rather than the Social Security number.
- 2) University student employees must be enrolled and attending classes to be eligible for payment. To insure that students are enrolled the time cards are compared to the Registrar's current enrollment records. For this reason, the name and student number on the time card must be exactly the same as it appears on the Registrar's record. Students who have gained employment by assuring the department they will enroll must enroll promptly or be terminated.

4. Deadline for Submitting Payroll Time Cards

- a. Bi-weekly pay periods for hourly and student employees end on Sunday at midnight. Payroll time cards for hourly employees, excluding Clerical-Technical, must be delivered to the Payroll Department by 10:00 a.m. the following Monday morning. When a short work week occurs specific instructions will be issued regarding the deadline.
- b. Time cards received after 10:00 a.m. Monday will be held and processed with the next bi-weekly payroll. Employees not paid because of late arrival of time cards may obtain an advance of 90% of the net amount earned. The employee should request an advance in person at the Payroll Department between 1:00 and 4:00 p.m. on the regular pay date or between 8:15 a.m. and 4:00 p.m. the week following the regular pay date.

(Payroll Department Cont.)

F. Rate of Pay

1. Academic

- a. Rate of pay is determined from the appointment form.
- b. Rate changes are made on the basis of new appointment forms or "Change of Status Recommendation" forms and must be approved by the Provost and Board of Trustees.
- c. The forms are available in the Provost's Office.

2. Graduate Assistant

- a. Rate of pay is determined from the appointment form.
- b. Rate changes are made on the basis of an amended or new appointment form.
- c. The forms are available in the Provost's Office.

3. Salaried Non-Academic Employees

- a. Rate of pay is determined and approved by the Personnel Department.

4. Hourly Employees - Rate changes for hourly employees are approved by the Personnel Department and forwarded to the Payroll Department. Time cards should not reflect a new rate until it has been approved and the Payroll Department has a record of the change.

5. Student Employees - Job classification and grade level must be reported to the Student Employment Office using the "Student Employee Change of Status" form (see Student Employment Manual" prepared by the Student Employment Office).

G. Distribution of Checks

1. Direct Deposit

- a. Employees may have their checks deposited directly to their personal checking or savings accounts by completing a "Direct Deposit Authorization" form. (See Sample, Page 55.20). This form may be completed at the Payroll Department or at the MSU Credit Union for direct deposit at that institution.

(Payroll Department Cont.)

- b. Checks for these employees will be deposited in their bank accounts on the morning of pay day. The employee will receive a "Direct Deposit Notification" showing gross pay, itemized deductions and net pay.
 - c. Direct deposit may be discontinued if the Payroll Department has received the notice by the first day of the month preceding the payday and for hourly employees by the Monday preceding the payday.
2. Distribution to Departments
- a. Checks are picked up by the Campus Mail Service for delivery to the departments.
 - b. Checks or Direct Deposit Notifications should be handed directly to the payee or placed in sealed envelopes for delivery by a designated employee.
 - c. Payroll checks which must be cancelled and rewritten due to:
 - 1) Late termination,
 - 2) Leave of absence without pay,
 - 3) Too many hours on Student or Hourly,
 - 4) Students paid on incorrect student numbers,should be delivered to the Payroll Department, 350 Administration Building immediately.
 - d. Payroll checks not delivered to employees within thirty days should be returned to the Payroll Department with a memo indicating the reason the employee did not receive the check. The Payroll Department will attempt to locate the employee and deliver the check.
3. Checks Not Prepared
- a. A payroll check may not be issued due to the following reasons:
 - 1) Employment data was received by the Payroll Department after the deadline.
 - 2) Hourly or student employee time cards were received after the deadline.

(Payroll Department Cont.)

- 3) Student employee was not registered for the current term or student authorization was not properly completed.
- b. In order to process an employee's check with the current payroll, employment data information must be delivered to the Payroll Department on or before the dates indicated below:
 - 1) Salary - 15th of the month
 - 2) Graduate Assistant - 1st of the month
 - 3) Hourly & Student - by 10:00 a.m. on the Monday preceding the pay date.
- c. Changes in exemptions, payroll deductions, and Direct Deposit authorizations must also be processed according to the above dates to be effective with the current payroll, except for Salary Direct Deposit Authorizations which must be processed by the first working day of the month preceding the paydate.

H. Payroll Cash Advance

1. Purpose - Employees failing to receive a check on the expected pay date may obtain a payroll cash advance of not more than 90% of the net amount earned.
2. Procedures
 - a. A request for a payroll cash advance should be made in person at the Payroll Department, on or after the regular pay date.
 - b. Before a payroll cash advance can be made, salary employees, Clerical-Technical or Graduate Assistants must have on file at the Payroll Department the appointment form or approved personnel form. Salary employees must make their request by the 15th of the month following the month in which they did not receive an expected paycheck. Clerical-Technical employees must make their request within one week following the paydate. Graduate Assistants must make a request by the last working day of the month in which they did not receive an expected paycheck. For hourly employees (excluding Clerical-Technical) and student employees, a completed payroll time card must be on file at the Payroll Department or be presented by the employee when requesting an advance.

(Payroll Department Cont.)

I. Record of Hours Worked

1. Requirement

- a. The Fair Labor Standards act requires that a record of hours worked be maintained for all non-exempt employees. Academic and Administrative-Professional personnel ranked AP-11 and above are considered to be exempt employees. All other employees are non-exempt.
 - b. Payroll time cards are appropriate records for student and hourly employees.
2. Retention of Records - Each department is responsible for keeping a record of hours worked on each non-exempt employee four months after the end of the fiscal year.

II. GRADUATE ASSISTANT CERTIFICATE OF WITHHOLDING TAX EXEMPTION

- A. Graduate assistantship stipends are not subject to Social Security taxes.
- B. If the assistantship is primarily for research, and is supported by gift, grant or Experiment Station funds, and if all candidates in the degree program in which the assistant is enrolled are required to do equivalent research, the stipend may be exempted from Federal, State and local income tax withholding. The taxability of such stipends is subject to review by the Internal Revenue Service.
- C. If the assistantship is primarily for teaching, applicable Federal, State and local income taxes will be withheld. If all candidates in the degree program in which the assistant is enrolled are required to do equivalent teaching, the assistant may file for refund of the amount withheld as part of his or her annual tax return. The Internal Revenue Service may hold, however, that such stipends are taxable.
- D. If the Chairperson of the department determines that the graduate research assistant qualifies for tax exemption, the exemption certificate on the appointment form should be completed. If the appointment does not qualify, the exemption certificate should be crossed out.

(Payroll Department Cont.)

III. REQUIREMENTS FOR CHANGE OF NAME, ADDRESS OR TELEPHONE NUMBER

A. Change of Name

1. Non-Academic Employees

- a. The name of an employee on the payroll records must be the same as the name indicated on the employee's Social Security card.
- b. Name changes cannot be made on payroll records (including changes of name on prepunched time cards) until the employee has submitted a changed copy of their Social Security card.
- c. Processing of the Personnel Action Notice (PAN) form by the department is to be used to make a name change.

2. Academic - Academic personnel must communicate changes in name by letter to the Office of the Secretary to the Board of Trustees, with copies to the Academic Personnel Records Office and to the Payroll Department. In addition, the Address Information Notice (AIN) should accompany the letter to the Academic Personnel Records Office.

3. Graduate Assistants and Students - Graduate Assistants and Students must make name changes at the Registrar's Office, 150 Administration Building and file a new W-4 with the Payroll Office.

4. Changing Withholding Certificates - Every employee who changes their name must also submit to the Payroll Department a new Withholding Exemption Certificate for Federal and State of Michigan Income Taxes (Form W-4), (See Sample, Page 55.17) and a Withholding Certificate for City Income Tax (Form CW-4), (See Sample, Page 55.18), if applicable.

(Payroll Department Cont.)

- B. Change of Payroll Address - Faculty and Staff addresses are input into the Payroll system from the Faculty/Staff address system. The Personnel Action Notice (PAN) or the Address Information Notice (AIN) should be used. Graduate Assistants and Student address changes should be made at the Registrar's Office as they are input into the Payroll system from the Registrar's address system.
- C. Error in Social Security Number - If an error in a social security number is discovered on any record used by the University, the employee should bring his or her Social Security card to the Payroll Department where a photocopy will be made and forwarded to the Social Security Administration Office for the correction of the employee's records.

IV. COMPENSATION FOR NON-REGULAR ASSIGNMENTS OR DUTIES

- A. University Personnel - Every department paying personnel with faculty status for part-time work needs to process these persons through the Continuing Education overload payment system. The Department of Continuing Education should be consulted. For details call 355-0140.
- B. Temporary Appointees (Including Honoraria).
 - 1. Individuals included in this classification:
 - a. Persons engaged as lecturers, speakers or other program personnel for a period not to exceed ten days and for an agreed upon stipend or fee of not more than \$1,500.

(Payroll Department Cont.)

- b. Persons retained by the University as consultants, specialists, editors, reviewers or in similar capacity on a fixed fee basis.
 - c. Excluded from the designation of Temporary Appointees are persons hired by the University and paid on an hourly, weekly, monthly, or other pro-rata basis, and any others for whom a employer-employee relationship exists.
 - d. General fund labor and equipment accounts may not be used.
- 2. Payment to persons covered under 1a. and 1b. above must be made on a Direct Payment Voucher.
 - 3. The payee's home address and Social Security Number must be shown on the Direct Payment Voucher as the Internal Revenue Service requires that the University report these payments on an Information Return, Form 1099, at the end of the calendar year.
 - 4. All Direct Payment Vouchers on general fund accounts must be sent to the Office of Planning and Budgets, 321 Administration Building for approval.
 - 5. All compensation paid to temporary appointees including honoraria should be charged to either the Salary account or to the Supplies and Services account, using Object Classification Code 072.
 - 6. Any portion of the payment designated for travel must be charged to the Supplies and Services account, using the appropriate Object Classification Code (Codes 020 through 026).
- C. Independent Contractors and Interviewers
- 1. Definition - Michigan State University employees performing services in their homes or working as interviewers off-campus apart from their regular work assignments are considered independent contractors and not employees in such capacity if the following conditions are met.
 - a. Not a continuing work relationship, but rather a single job transaction or an occasional performance of the service. Service is available to general public as well as to employees of MSU.

(Payroll Department Cont.)

- b. Service is performed during non-working hours and is not related to regular job.
 - c. Individual performing the service schedules own working hours and furnishes own supplies and equipment.
 - d. Individual performs the service off-campus, under no direct supervision as to the means and method of operation. The individual uses own methods and receives no training from the one who purchases the service.
 - e. Individual is at liberty to accept or reject the work offered without prejudice.
 - f. Individual is paid on a piecework basis and is not guaranteed a minimum quota of pay or work.
2. Method of Payment

- a. Persons classified as independent contractors must be paid on a Direct Payment Voucher. The Direct Payment Voucher must include the payee's home address and Social Security Number.
- b. Persons unable to meet the independent contractor requirements are considered "employees" of the University and paid according to the method used for regular employees.

D. Overtime

1. Definition

- a. The Fair Labor Standards Act stipulates that non-exempt employees must be appropriately compensated for overtime hours worked. Overtime is earned when an employee works in excess of 40 hours in a standard work week. The standard work week is a 168-hour period which, for the University generally starts at 12 midnight on Sunday and ends at 12 midnight on the following Sunday. However, some units of the University have established different work weeks. Such changes must be approved by the Controller.

(Payroll Department Cont.)

- b. Hours worked in excess of a standard work day or week should be approved in advance by completing Form CO-pa-25, "Approval for Overtime for Non-Exempt Employees." (See Sample, Page 55.23).

2. Compensation

a. Time-Off

- 1) As a general policy, overtime hours are to be compensated by time-off, if the equivalent time-off can be mutually agreed upon and the time-off can be scheduled within the work week.
- 2) If time-off cannot be given on/or before the last day of the current pay period the employee must be paid for the overtime hours.

b. Payment for Overtime Hours

- 1) For hourly employees, excluding Clerical-Technical, overtime must be submitted on a red payroll overtime time card. Clerical-Technical overtime must be submitted on a green payroll overtime time card. Salary overtime must be submitted on a blue payroll overtime card (See Sample, Page 55.24). The payroll overtime cards provide for increasing overtime hours earned by 50% to reflect a time and one-half payment. Hours reported on the payroll overtime cards must be rounded off to the nearest tenth of an hour.
- 2) All red and green payroll overtime time cards should follow the same schedule of submission detailed in section I.E.4., "Deadline for Submitting Payroll Time Cards."
- 3) All blue payroll overtime time cards should be submitted to the Payroll Department on Wednesday of Student Labor pay weeks.
- 4) A separate payroll overtime time card must be prepared to pay overtime hours applicable to the shift differential. (Does not apply to payroll of Physical Plant or to Housing and Food Services hourly employees.)
- 5) Overtime cards may be obtained from the Payroll Department.

FORM W-4 (MSU)		Employee's Withholding Allowance Certificate		See IRS Rev. 1/82 W-4 Instructions	
1. Please type or print your name: Last, First, Middle		2a. Your social security number		2b. If Student, your Student Number	
Your home address		3a. PAYROLL TYPE <input type="checkbox"/> SALARY <input type="checkbox"/> GRAD. ASST.		<input type="checkbox"/> BI-WEEKLY <input type="checkbox"/> OTHER <input type="checkbox"/> STUDENT	
City, State, and Zip Code		3b. Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married, but withhold at higher single rate			
4. Total number of allowances you wish to claim		(You or your spouse (if married) may not claim the same allowances. For highest tax withheld, claim "0")		FEDERAL	STATE
5. Additional amount, if any, to be deducted from each pay				\$	\$
6a. You may claim exemption from withholding if last year you did not owe any Federal / State income tax with a right to a full refund AND you expect to have a right to a full refund this year. (If both conditions apply, you may enter "EXEMPT".) If you claim "EXEMPTION", it is necessary to file a new form W-4 between January 1 and February 15 next year.					
6a. If you entered "EXEMPT", are you a full-time student? <input type="checkbox"/> Yes <input type="checkbox"/> No					
7. Under the penalties of perjury, I certify that I am entitled to the number of withholding allowances claimed on this certificate, or if claiming exemption from withholding, that I am entitled to claim the exempt status.					
EMPLOYEE'S SIGNATURE _____ DATE _____					
MSU IS AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER					

MICHIGAN STATE UNIVERSITY
PAYROLL DEPARTMENT
230 ADMINISTRATION BLDG.
EAST LANSING, MI. 48824
FED. TAX ID# 38-6005884W
STATE TAX ID# S89-0850502

MSU 6/6/82

CO-PA-42

Name _____ Is this a change in Financial Institution? ☐ Yes ☐ No

Last First M.I.

Account Number Including Dashes ☐ Checking ☐ Savings

Date _____

O-13091 Michigan State University Printing

☐ Checking ☐ Savings☐ Checking ☐ Savings

Date _____

NAME	DEP.	IDENTIFICATION NO.	S.S.	ACCT. OR JOB NUMBER	DEPT. CDE.	TIME	RATE	AMOUNT
------	------	--------------------	------	---------------------	------------	------	------	--------

NAME (PRINT LAST NAME FIRST)			
IDENTIFICATION NUMBER			
ACCOUNT NO.		LEAVE BLANK	
OBJECT CLASS	BLDG. NUMBER	DIV. NO.	PHYSICAL PLANT ONLY
DEPARTMENT NAME			
TIME		RATE	
UNIT <input type="checkbox"/>	HOURS <input type="checkbox"/>	MONTH <input type="checkbox"/>	GROSS AMOUNT
OF <input type="checkbox"/>	DAYS <input type="checkbox"/>	EVENT <input type="checkbox"/>	
TIME <input type="checkbox"/>	WEEKS <input type="checkbox"/>	OTHER <input type="checkbox"/>	

HOURS TENTHS	DAYS
MONDAY	
TUESDAY	
WEDNESDAY	
THURSDAY	
FRIDAY	
SATURDAY	
SUNDAY	
MONDAY	
TUESDAY	
WEDNESDAY	
THURSDAY	
FRIDAY	
SATURDAY	
SUNDAY	
TOTAL FOR PERIOD	

DAILY TIME RECORD

PAY PERIOD

FROM 19
TO 19

APPROVED FOR PAYMENT

DEPT. HEAD (original signature)

DEAN OR DIRECTOR

APPROVAL DATE

DO NOT FOLD - STAPLE
OR MUTILATE THIS
CARD

DO NOT WRITE ABOVE THIS LINE

NAME	DEP.	IDENTIFICATION NO.	S.S.	ACCT. OR JOB NUMBER	DEPT. CDE.	TIME	RATE	AMOUNT																																																																																												
<div style="display: flex; justify-content: space-between;"> <div style="width: 35%;"> <p>NAME (PRINT LAST NAME FIRST)</p> <p>IDENTIFICATION NUMBER</p> <p>ACCOUNT NO. LEAVE BLANK</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>OBJECT CLASS</th> <th>BLDG. NUMBER</th> <th>DIV. NO.</th> <th>PHYSICAL PLANT ONLY</th> </tr> <tr> <td colspan="4">DEPARTMENT NAME</td> </tr> <tr> <td colspan="2">TIME</td> <td colspan="2">RATE</td> </tr> <tr> <td>UNIT <input type="checkbox"/></td> <td>HOURS <input type="checkbox"/></td> <td>MONTH <input type="checkbox"/></td> <td>GROSS AMOUNT</td> </tr> <tr> <td>OF <input type="checkbox"/></td> <td>DAYS <input type="checkbox"/></td> <td>EVENT <input type="checkbox"/></td> <td></td> </tr> <tr> <td>TIME <input type="checkbox"/></td> <td>WEEKS <input type="checkbox"/></td> <td>OTHER <input type="checkbox"/></td> <td></td> </tr> </table> </div> <div style="width: 25%;"> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>HOURS TENTHS</th> <th>DAYS</th> </tr> <tr><td>MONDAY</td><td></td></tr> <tr><td>TUESDAY</td><td></td></tr> <tr><td>WEDNESDAY</td><td></td></tr> <tr><td>THURSDAY</td><td></td></tr> <tr><td>FRIDAY</td><td></td></tr> <tr><td>SATURDAY</td><td></td></tr> <tr><td>SUNDAY</td><td></td></tr> <tr><td>MONDAY</td><td></td></tr> <tr><td>TUESDAY</td><td></td></tr> <tr><td>WEDNESDAY</td><td></td></tr> <tr><td>THURSDAY</td><td></td></tr> <tr><td>FRIDAY</td><td></td></tr> <tr><td>SATURDAY</td><td></td></tr> <tr><td>SUNDAY</td><td></td></tr> <tr><td>TOTAL FOR PERIOD</td><td></td></tr> </table> </div> <div style="width: 30%; text-align: center;"> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">DO NOT WRITE ABOVE THIS LINE</p> </div> <div style="width: 30%;"> <h3 style="text-align: center;">STUDENT PAYROLL CARD</h3> <p>PAY PERIOD 19 TO 19</p> <p>NOTE THIS PAYMENT CANNOT BE MADE UNLESS A W-4 FORM IS FILED WITH PAYROLL OR ACCOMPANIES THIS CARD</p> <p>I CERTIFY THAT THE PAYEE WAS ENROLLED AS A MICHIGAN STATE UNIVERSITY STUDENT DURING ALL OR PART OF THE PAY PERIOD COVERED BY THIS TIME CARD</p> <p>DEPT. HEAD original signature</p> <p>DEAN OR DIRECTOR</p> <p>APPROVAL DATE</p> <p style="text-align: right;">DO NOT FOLD - STAPLE OR MUTILATE THIS CARD</p> </div> </div>									OBJECT CLASS	BLDG. NUMBER	DIV. NO.	PHYSICAL PLANT ONLY	DEPARTMENT NAME				TIME		RATE		UNIT <input type="checkbox"/>	HOURS <input type="checkbox"/>	MONTH <input type="checkbox"/>	GROSS AMOUNT	OF <input type="checkbox"/>	DAYS <input type="checkbox"/>	EVENT <input type="checkbox"/>		TIME <input type="checkbox"/>	WEEKS <input type="checkbox"/>	OTHER <input type="checkbox"/>		HOURS TENTHS	DAYS	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY		MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY		TOTAL FOR PERIOD																																					
OBJECT CLASS	BLDG. NUMBER	DIV. NO.	PHYSICAL PLANT ONLY																																																																																																	
DEPARTMENT NAME																																																																																																				
TIME		RATE																																																																																																		
UNIT <input type="checkbox"/>	HOURS <input type="checkbox"/>	MONTH <input type="checkbox"/>	GROSS AMOUNT																																																																																																	
OF <input type="checkbox"/>	DAYS <input type="checkbox"/>	EVENT <input type="checkbox"/>																																																																																																		
TIME <input type="checkbox"/>	WEEKS <input type="checkbox"/>	OTHER <input type="checkbox"/>																																																																																																		
HOURS TENTHS	DAYS																																																																																																			
MONDAY																																																																																																				
TUESDAY																																																																																																				
WEDNESDAY																																																																																																				
THURSDAY																																																																																																				
FRIDAY																																																																																																				
SATURDAY																																																																																																				
SUNDAY																																																																																																				
MONDAY																																																																																																				
TUESDAY																																																																																																				
WEDNESDAY																																																																																																				
THURSDAY																																																																																																				
FRIDAY																																																																																																				
SATURDAY																																																																																																				
SUNDAY																																																																																																				
TOTAL FOR PERIOD																																																																																																				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>DIV. NO.</th> <th>TITLE</th> <th>DEPT.</th> <th>CLASS</th> <th>BLDG. NO.</th> <th>NAME</th> <th>S.S.</th> <th>IDENTIFICATION NUMBER</th> <th>ACCT. OR JOB NUMBER</th> <th>AMOUNT</th> <th>TIME</th> <th>RATE</th> </tr> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td> <td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td>32</td><td>33</td><td>34</td><td>35</td><td>36</td><td>37</td><td>38</td><td>39</td><td>40</td><td>41</td><td>42</td><td>43</td><td>44</td><td>45</td><td>46</td><td>47</td><td>48</td><td>49</td><td>50</td><td>51</td><td>52</td><td>53</td><td>54</td><td>55</td><td>56</td><td>57</td><td>58</td><td>59</td><td>60</td><td>61</td><td>62</td><td>63</td><td>64</td><td>65</td><td>66</td><td>67</td><td>68</td><td>69</td><td>70</td><td>71</td><td>72</td><td>73</td><td>74</td><td>75</td><td>76</td><td>77</td><td>78</td><td>79</td><td>80</td> </tr> </table>									DIV. NO.	TITLE	DEPT.	CLASS	BLDG. NO.	NAME	S.S.	IDENTIFICATION NUMBER	ACCT. OR JOB NUMBER	AMOUNT	TIME	RATE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80
DIV. NO.	TITLE	DEPT.	CLASS	BLDG. NO.	NAME	S.S.	IDENTIFICATION NUMBER	ACCT. OR JOB NUMBER	AMOUNT	TIME	RATE																																																																																									
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80																					

APPROVAL FOR OVERTIME HOURS FOR NON-EXEMPT EMPLOYEES
Michigan State University

Name of Employee _____

Social Security No. _____

Date(s) overtime will be incurred _____

Estimated number of overtime hours _____

Compensation for overtime { ☐ Pay
 ☐ Time off

Reason for overtime _____

Signature _____
Department Chairman or Supervisor

_____ Date

Signature _____
Employee

_____ Date

Record of Overtime

	Mon.	Tue.	Wed.	Thu.	Fri.	Sat.	Sun.	Total
Date								
Overtime hours								

Compensation

Time off (indicate dates and hours) _____

Pay (indicate date paid and hours) _____

INSTRUCTIONS:

1. Each department is responsible for maintaining a record of overtime hours earned and when and how compensated. This record must be **retained for 3 years**.
2. Overtime must be approved in advance by department chairman or supervisor on a weekly basis ending with Sunday.
3. Complete a separate form for each employee, including student employees.
4. Overtime hours worked must be recorded daily.
5. Compensation for overtime should be determined by the supervisor or department chairman.
6. When an employee is to be paid for overtime hours, process a payroll overtime card with the next regular labor payroll. Overtime hours only should be reported on the payroll overtime card.
7. Employees should sign this form to indicate that they understand how compensation will be given.

NAME	DEP.	IDENTIFICATION NO.	S.S.	ACCT. OR JOB NUMBER	DEPT. CODE	TIME	RATE	AMOUNT
------	------	--------------------	------	---------------------	------------	------	------	--------

NAME (PRINT LAST NAME FIRST)				IDENTIFICATION NUMBER		LEAVE BLANK		ACCT. OR JOB NUMBER		DO NOT WRITE ABOVE THIS LINE		DAILY TIME RECORD							
OBJECT CLASS				BLDG. NUMBER		DIV. NO.		PHYSICAL PLANT ONLY				PAY PERIOD							
DEPARTMENT NAME				TIME		RATE		GROSS AMOUNT				FROM 19 TO 19							
UNIT OF TIME				HOURS DAYS WEEKS		MONTH EVENT OTHER		DEPT. HEAD (original signature)				APPROVED FOR PAYMENT							
MONDAY				TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY		DEAN OR DIRECTOR			
MONDAY				TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY		APPROVAL DATE			
TOTAL FOR PERIOD				HOURS TENTHS		DAYS		DEPT. HEAD (original signature)		DEAN OR DIRECTOR		DO NOT FOLD - STAPLE OR MUTILATE THIS CARD							

DIV. NO.	TITLE	DEPT.	CLASS	BLDG. NO.	NAME	S.S.	IDENTIFICATION NUMBER	ACCT. OR JOB NUMBER	AMOUNT	TIME	RATE																																																																				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80

RED - Hourly excluding Clerical-Technical

GREEN - Clerical-Technical

BLUE - Salaried Non-Academic

CO-PA-40 **EARNED INCOME CREDIT ADVANCE PAYMENT CERTIFICATE**
(Please Print) **Form W-5** This certificate expires on December 31, _____.

Last Name First Middle

Number and Street

City State Zip Code

Salary ☐

Labor ☐

Grd Ast ☐

Student ☐

NOTE: If you file Form W-5 with an employer to receive advance payments of the earned income credit for _____, you must file Form 1040 or Form 1040A for _____. If married, you must file a joint return.
Year Year

1. I expect to be eligible for the earned income credit for _____, I have no other certificate in effect with any other
Year
current employer, and I choose to receive advance payment of the earned income credit.
2. If you are not married, check "No"
If you are married, does your spouse have a certificate in effect for _____ with any employer?
Year

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Under penalties of perjury, I declare that the information I have furnished above, to the best of my knowledge, is true, correct, and complete.

Signature _____ Date _____

MANUAL OF BUSINESS PROCEDURES - VOLUME I

Michigan State University

Index - Continued

CONTROLLER'S OFFICE

Employees Withholding	55.1
Encumbrance Adjustments	18.1
Expenditure Codes	20.1
Field Trips	25.1
Foreign Checks	15.2
Graduate Assistant Stipends	55.1
Honoraria	55.11, 75.2
Identification Cards	30.1
Independent Contractors	55.12
Insurance and Risk Management Department	35.1
Invoice Processing System	74.1
Journal Entry Requests	40.1
Loss Prevention	35.2
Meals and Lodging	45.1
Membership Dues	47.1
Military Pay	55.15
Multiple Check Voucher	75.4
Object Codes	
Expense	20.1
Revenue	65.1
Overtime	55.14

MANUAL OF BUSINESS PROCEDURES - VOLUME II

Michigan State University

Table of Contents

SERVICE AREAS

<u>Section Name</u>	<u>Section #</u>
Alterations and Improvements	200
Bookstore	205
Administrative Data Processing Department	210
Garage Service	215
General Stores	220
Keys and Lock Service	225
Laboratory Animal Care Service	230
Library Copy Center	235
Library - Database Searching Services	236
Mail Distribution Labels	240
Motor Pool	245
M.S.U. Press	250
Office Services Department	255
Physical Plant Division	260
Photographic Laboratory	265
Purchasing Department	270
Radio Broadcasting Department	275
Telephone Services and Charges	280
University Printing	285
University Publications, Office of	290

ALTERATIONS AND IMPROVEMENTS OF FACILITIES

I. POLICY

- A. To insure integration with existing University facilities and to comply with safety and building codes, statutes, regulations and University specifications, all alterations or improvements to the facilities of MSU must receive proper authorization.
- B. All interior alterations or improvements are under the initial jurisdiction of the Office of Facilities Planning and Space Management, 412 Olds Hall, Telephone No. 355-1846.
- C. Before undertaking any alteration or improvement within a building, departments must:
 - 1) obtain approval from Facilities Planning and Space Management concerning room use and design; and
 - 2) specify appropriate and adequate funding arrangements to cover the cost of the project.
- D. An alteration or improvement within an existing building is a change which requires a modification to the walls, floors, ceilings, utilities, attachment of furnitures or partitions to such surfaces.
- E. Installation of equipment which will change consumption of utilities is considered an alteration within the building.

(Alterations and Improvements of Facilities cont.)

II. INITIAL REQUEST

- A. The department or unit prepares in triplicate Form 0-5884, "Request for Interdepartmental Material or Service," to get an estimate of the cost of the project described thereon; the form signed by the unit administrator is forwarded through the corresponding dean or appropriate administrative officer to Facilities Planning and Space Management.
- B. Facilities Planning and Space Management will either disapprove the request and return it to the department or will approve it and forward it to the Physical Plant Division for an estimate. The estimate will be returned to the requesting department either directly by the Physical Plant Division or through Facilities Planning and Space Management.
- C. Before reaching a final decision on the proposed alterations, consideration should be given to: funding, timing, urgency, and priorities or plans for the space involved. Departments are to consult with Facilities Planning and Space Management at this stage.

- III. FINAL REQUEST - If the department wishes to proceed with the project, it will prepare in triplicate, and forward a second Form 0-5884, "Request for Interdepartmental Material or Service," to Facilities Planning and Space

(ALTERATIONS AND IMPROVEMENTS OF FACILITIES CONT.)

Management, requesting that the project be undertaken in accordance with the estimate received. All accounts to be charged and corresponding amounts must be clearly specified on the form.

IV. AUTHORIZATION - Facilities Planning and Space Management will either approve and immediately forward the request to the Physical Plant Division or, depending on the total cost involved, will hold it for approval by the Board of Trustees at its next regular monthly meeting before forwarding it.

V. DOCUMENTS

- A. After the alterations or improvements are authorized, the project is then designed and all construction documents are developed. Departments must allow adequate time for this phase of the project.
- B. Some work will be performed by University service units, but frequently, competitive bids are solicited from outside contractors and once accepted, a contract or purchase order is issued to the successful bidder.

VI. OBLIGATIONS OF CONTRACTORS - SUPERVISION, INSPECTION AND PAYMENT

- A. Contractors working on University property must:
 - 1) carry proper insurance coverage;
 - 2) satisfy equal employment opportunity requirements;
 - 3) provide necessary bonding;
 - 4) assure quality of materials, workmanship, and completion of the project.

ADMINISTRATIVE DATA PROCESSING DEPARTMENT

I. GENERAL

The Administrative Data Processing Department, located at 2 Administration Building (telephone 353-4420) is responsible for providing administrative data processing support to Michigan State University colleges and departments, and the development and implementation of University management information systems.

II. REQUEST FOR SERVICES

A. Programming Services

Requesting department must send a Request for Programming Support form (available through General Stores) to the Administrative Data Processing Department outlining the programming services required. Requests for programming services not submitted on a Request for Programming Support form will be returned to the requesting department. See Exhibits I and II, pages 210.9 and 210.12 requesting instructions on completing the Request for Programming Support. Completed requests should be carried or mailed to the Department Office, Room 2 Administration Building.

B. Signature Digitization

Signatures may now be digitized for a fee for use on output from the Xerox 9700 Page Printer. Depending on the use of the signature, two (2) security levels will be observed.

1. Level 1: Signatures for forms or output that have no security requirements will be permanently housed in the Xerox 9700 Page Printing System. The user will sign a release and the release will be retained as the documentation of authorization. Scheduled productional use of the signature can be made without user intervention.

(Administrative Data Processing Department Cont.)

2. Level 2: Signatures for forms or output that have security requirements will be retained by the user on either of the following media:

- a) A magnetic tape of the signature only.
- b) A disk pack with the signature and other related secured data such as check encryption, accounts numbers, etc.

Usage will be controlled by the owner of the signature. Production will be scheduled during regular business hours and monitored by the user.

C. Production Services

Requests for output from currently operating University systems not requiring programming support should be submitted in written form to Data Processing. User-provided input necessary to run the job, as well as written requests for production services, should be delivered to the Input/Output Window located on the Ground Level, Room 47 Administration Building. Requests should specify type of output (punched cards, printouts) and any requirements for interpreting, carbon removal (decarbing) or page separation (bursting), quantity of output, sequence of information, etc.

(Administrative Data Processing Department Cont.)

D. Equipment Acquisitions

Requests for Data Processing equipment for use by departments (CRT's, printers, keypunch machines, etc.) should be addressed to the Data Processing Department and contain the type(s) of equipment desired, the location(s) at which the equipment will be used, the user contact person's name and telephone number, and the date the equipment should be installed. A representative of Data Processing will then prepare a cost estimate for the specific equipment required to meet the needs of the user department and will consult with the user department, as required, to facilitate the installation.

User departments requiring terminals should notify Data Processing as soon as the need is identified. There are certain delays in equipment availability. There may also be certain limitations on the number of devices that can be communicating with the IBM 370/168, due to the present configuration. Early notification allows the department to plan for and overcome these problems.

E. Teleprocessing Considerations

The following list indicates what device types, their uses and protocols will be acceptable.

1. Local Terminals - directly attached to our IBM 370/168 computer by coaxial cable, possible only within a limited number of feet.

- a. For use in CICS and/or TSO

- (1) IBM 3277 or IBM 3278 cathode ray terminals (or plug compatible device).

- (2) IBM 3284 or IBM 3287 printer (or plug compatible device).

(Administrative Data Processing Department Cont.)

2. Remote Terminals - attached to our computer by modems, telephone line and broad band cable.

- a. For use in CICS

- (1) IBM 3767 printer/keyboard terminal (or plug compatible). The protocol for this device is asynchronous and the speed must be 1200 baud.
- (2) IBM 3271, 3275, or 3276 remote control unit (or plug compatible device). The protocol for this device is bi-synchronous and the speed can be up to 9600 baud.
- (3) IBM 3277 or 3278 cathode ray terminals (or plug compatible device).
- (4) IBM 3284 or 3287 printer (or plug compatible device).

- b. For use as Remote Job Entry device.

- (1) IBM 2780 (or plug compatible device). The protocol for this device is bi-synchronous and the speed must be 2400 baud.

- c. Data Processing does not support "remote" devices for use in TSO.

F. Equipment Repairs

The Data Processing Department will secure repair service for all machines on lease through Data Processing. Requests for repairs should be phoned to the Data Processing Department(3-4420) and the following information provided:

(Administrative Data Processing Department Cont.)

1. Machine type
2. Location of machine
3. Person to be contacted
4. Office address and phone number of the contact person
5. Description of the malfunction or service required

G. Cost Estimates

Cost estimates for services will be prepared, at the user department's request, by Data Processing. The requesting department will, after reviewing the estimate, confirm in writing that the project is to continue. Accurate cost estimates require evaluation of the request; therefore, estimates cannot be given over the telephone.

III. PRESERVATION OF PERSONAL PRIVACY AND CONTROL OF SENSITIVE FILES

- A. There exists public and legislative concern and regulation about individual rights to personal privacy. Use of computerized data processing has greatly increased the volume of available personal data, and has sensitized public awareness to the privacy issue. The computer is a tool to be used or misused. The issue of individual privacy and the computer, therefore, can only be resolved by regulating the user, not the computer.
- B. Overall responsibility for the security of the Data Processing Department and all facilities located in the Department rests with the Director of Data Processing who prescribes the procedures by which users may gain access to the Department. Beyond the responsibilities of the Director, the overall responsibility for data security of software applications/program bases resides with the functional file owner as listed on the next page:

(Administrative Data Processing Department Cont.)

<u>Data Files</u>	<u>Functional File Owner</u>
Student Records	Registrar
Admissions	Office of Admissions
Alumni	Alumni/Donor Records
Development Fund	Development Fund
University Business	Assistant Vice President for Finance
Budget	Office of Planning and Budgets
Academic Personnel	Provost
Non-Academic Personnel	Director of Personnel

- D. No personal or sensitive information will be extracted from automated files without the specific prior written approval of the functional file owner. The Data Processing Department cannot honor any request for data or access to source programs without such prior written approval. A copy of the release authorization request should be sent to the Data Processing Department by the requesting user. Release authorization is normally granted on a one-time basis only for specific information or data. Should the requestor require the information on a recurring basis, the original request for the release of the data or information must specifically identify the request as a recurring authorization request.

IV. LONG TERM RETENTION TAPE FILES

Data Processing has implemented a tape library management system (TLMS II) during the past year. All procedures using tapes have undergone conversions to meet department standards. All procedures will access tape files through the use of the data set name versus the current method of tape numbers being assigned by a scheduler.

(Administrative Data Processing Department Cont.)

All long term retention tapes (files which are retained for a period equal to or exceeding one year) will be physically exercised through this conversion. All unreadable files will be identified and users notified by Operations Support personnel. A copy of the files will be retained in off-site storage and a second copy in Data Processing for productional use. Off-site tape files will be exercised yearly and completely copied to a new tape every three years. Off-site tape files will also be used to recreate a productional file should it become unreadable or destroyed.

Users will be provided a listing of their files on a quarterly basis and will be allowed to extend necessary retention dates through the use of the quarterly report and memos to Data Processing.

Operations Support staff will be responsible for the initial conversion. They will also be responsible for all resolutions regarding problems and unreadable tapes during the conversion. Following the conversion, the responsibility for long term tape retention will be in Production Control.

V. METHOD OF PAYMENT

Payments for services rendered to the user department is made through charges to departmental accounts established by the Office of the Controller. Units without University account numbers are billed by the Accounts Receivable Department, Office of the Controller; these payments must be made at the Cashier's Office, 110 Administration Building.

(Administrative Data Processing Department Cont.)

VI. BILLING AND MONTHLY STATEMENTS

- A. Data Processing prepares two copies of the billing invoice, one of which is sent to the user department while the other is retained by Data Processing. Questions regarding the billing invoice should be directed to the Data Processing Department Office, 353-4420. All transactions are cut off and recorded through the last day of the month.
- B. Department charges will be reflected on a monthly ledger distributed by the Accounting Department. Monthly statements for non-University account number holders are processed by the Accounts Receivable Department.
- C. Charges for services rendered may not be divided between two or more accounts. Charges will be billed to the requesting department. Two or more departments sharing the cost should make their own arrangements for distribution of the charge.

(Administrative Data Processing Department Cont.)

EXHIBIT I

REQUEST FOR PROGRAMMING SUPPORT COMPLETION GUIDE

The information which follows is provided as a guide for preparation of the Request for Programming Support form. The sections (numbers) listed refer to specific areas on the form. Sections (numbers) not referenced are for Data Processing internal use only. (See page 210.12)

<u>SECTION</u>	<u>EXPLANATION</u>
(4)	The name, address, andd phone number informs ADP who the requestor is and for what department the work is required.
(5)	The date is the day you write your request.
(6)	The contact person is someone, other than the writer of the request, who is responsible for working with ADP. If the writer and the contact are one and the same person, (6) should be left blank.
(7)	Please provide your six digit University account number against which the work should be charged (even if the work is billed as "courtesy").
(8)	Some departments require the authorization of specific persons before obligations can be assumed for that department, no matter who has requested the service or obligation. If your departmental policies require an authorized signature, please provide ADP with the names and the signatures of those authorized to request service. Each "Request" must then be signed by one of these people. ADP will verify signatures whenever possible.

(Administrative Data Processing Department Cont.)

- (9) Please specify the type of work you wish to have done by checking the appropriate boxes:

New System Development should be checked if your request is for the design and implementation of a new system. A cost estimate will be done if this box is checked.

Modification to Existing System is appropriate when work presently done by ADP must be changed in some way. The change is to be a permanent change to an on-going productional system.

Cost Estimate should be checked when you are asking "How much would it cost if I wanted to" Cost estimates are not given over the phone as a rule since many of the specifics that affect the estimate may not be known at the time.

Special Requests are those services to be provided in a short amount of time and will occur only once (or so infrequently that a permanent change to an on-going system need not be made). If you are unsure that your request is "special", ADP will assist in making that determination.

Revision of Prior Document Number should be marked only if you are revising a previous "Request". Please indicate the document number of the prior request.

(Administrative Data Processing Department Cont.)

- (10) On-going systems and programs have been assigned a project code. The code contains one letter and two to four numbers (e.g., H0504). If you have existing project codes that relate to your request, please provide them. If no project code has been assigned, or you do not know the code, leave this section blank. ADP will complete it.

If you know the name of the system, or particular report that relates to your request, please provide this information for clarification.

- (11) The subject is a brief synopsis of your request. It is comparable to the "SUBJECT" line of a memorandum and is used for identification of your project on printed PCS reports. Please limit this line to no more than forty (40) characters.

- (12) If a specific calendar date deadline must be met, please provide the date upon which the work must be completed, assuming that the request is to be completed by 8:00 a.m. that day. Do not specify ASAP.

- (13) Some rank ordering is necessary, if you have multiple requests pending, to insure that ADP resources are directed to the more important, or more immediate, needs of the University. You need then not enter a number; "ahead of XXXXXX" will suffice. You will then be able to establish a ranked priority when you review your requests. A priority of "99" will be assigned if this area is left blank, and the request will be placed at the bottom of pending requests.

- (14) The specifics of the request should be detailed. Use additional sheets as necessary. Include any sample reports you have.

(1) MICHIGAN STATE UNIVERSITY
ADMINISTRATIVE DATA PROCESSING
REQUEST FOR PROGRAMMING SUPPORT
EXHIBIT II
Send to: Data Processing — Programming Request
Room 2 Administration Building 353-4420

USER CODE	Page: 210.12
(2)	Date: 6-30-82
DOCUMENT NUMBER	
(3)	

This section to be completed by Requestor (*Type or print in black ink*)

REQUESTOR'S NAME, TITLE, DEPARTMENT (4)	PHONE (4)	DATE PREPARED (5)	AUTHORIZING SIGNATURE(S) (8)
USER CONTACT, IF DIFFERENT THAN REQUESTOR (6)	PHONE (6)	ACCOUNT NUMBER (7)	

REQUEST FOR:

- (9) ☐ New System Development ☐ Cost Estimate ☐ Revision of Prior Document Number
☐ Modification of Existing System ☐ Special Request

PROJECT CODE (10)	SYSTEM NAME (if appropriate) (10)	PROGRAM OR REPORT (if appropriate) (10)
SUBJECT OF REQUEST (<i>Limit 40 Characters</i>) (11)	REQUESTED COMPLETION DATE (12)	PRIORITY INFORMATION (13)

DESCRIPTION OF REQUEST: Explain Briefly, but Specifically, the Service Being Requested. Attach Exhibits as Required. Use additional sheets if necessary.

(14)

NOTE: This form is available through General Stores in pads of 25.
Order #140-2448, FORM DATA PROC PROGRAMMING REQ.

This Section to be Completed by Data Processing

DATE STARTED	*PROJECT COMPLETION INFORMATION*		DATE COMPLETED
APPROVAL ACCEPTANCE SIGNATURES (if appropriate)	Project Leader/Programmer	Date	Comments/Work Days
	Supervisor		
	Requestor		

LIBRARY COPY CENTERS

- I. Library copy centers are available during normal library hours to copy material at five cents per copy.
- II. This service can be paid for in cash or charged to departmental accounts.
- III. One can copy their own material or at some copy centers material may be left for copying by the copy center staff.
- IV. No paper work is required for self serve cash sales. One simply copies the material and pays the cashier five cents for each copy made.
- V. Charge sales require that the copy center attendant be given an account number to be charged, department name, and the department's main office phone number. Each month the charges for the month will be totaled and a copy of the ledger will be mailed to the address indicated on the ledger. The last amount shown on the ledger will represent the total of all charges for services completed during the previous month. This amount will be charged to the account by journal entry and will appear on the fund ledger for the current month.
- VI. A department wishing to have their copies mailed to them, may arrange this by leaving a properly filled out campus mail envelop and completing the charge form in advance.

LIBRARY--DATABASE SEARCHING SERVICES

- I. Customized retrospective searches of online bibliographic databases are conducted by librarians in the Reference Library, the Science Library and in a number of branch libraries. Current awareness searches which are run against each update of a database are also available.
- II. Rates charged are as specified in Library Policy and Procedure Statement 11.20 and are set at a level calculated to recover the cost of the following direct cost elements: communications, online connect time, offline printing and any royalties for online time and printing. Therefore, the total cost of a search varies with the amount of usage. The average cost currently ranges from a low of around \$13.00 to a high of around \$23.00, with the overall average at just under \$17.00. Rates are subject to change without notice.
- III. For more specific information on databases available, rates or procedures for arranging for a search, contact a librarian in the Science Library or Reference Library as appropriate for the field of interest.
- IV. A search can be paid for in cash, billed to an individual or charged to a university account.
- V. All searches are recorded on a log. Information logged includes all details of the transaction: vendor, date, file, total online time, number of prints, total charges; also, user name, address, organization, unit, account number and method of payment as appropriate.
- VI. A receipt is issued for each cash transaction.
- VII. Personal charges are posted to individual ledger sheets headed with the user's name and address. Each month the charges for the month are totalled and a copy of the ledger sheet is mailed to the user with instructions for making payment. Follow up billings are made as necessary.
- VIII. Charges to organizations are posted to individual ledger sheets headed with the name of the organization, the department, address and account number. Searches completed during the month are listed individually with the following data provided: user name, file searched, and total charge. Each month all charges for the month are totalled and a copy of the ledger sheet is mailed to the organization.

Charges to MSU units are charged to the account by journal entry and will appear on the fund ledger for the current month.

For outside organizations instructions for making payment are included with the copy of the ledger sheet. Follow-up billings are made as necessary.

MAIL DISTRIBUTION LABELS

- I. Departments of the University may order sets of labels for mailing official communications to persons holding positions with administrative responsibility in the different departments.
- II. CODES - Each letter represents a code according to line of authority and the respective administrative titles under it:

ACADEMIC CODES

A

B

C

ADMINISTRATIVE TITLES

DEANS

DIRECTORS

PROVOST

ASSOC PROVOSTS

ASST PROVOST

ASST COORDINATOR

ASST DEANS

ASSOC DEANS

COORDINATOR

ASST TO PROVOST

DIRECTORS

CHAIRMEN

EDITOR

DIRECTOR ADVISE

COORDINATOR

ASST TO DEANS

ADM DIR

SECRETARY

MANAGERS

EXEC DIRECTOR

SUPERVISOR

ASSOC DIR

PROG DIRECTOR

(Mail Distribution Labels Cont.)

D

ASSOC DIRECTORS
MANAGERS
DIRECTOR
ASST DIRECTORS
ADVISOR

NON-ACADEMIC CODES

ADMINISTRATIVE TITLES

J

VICE PRESIDENTS
EXE VIC PRES
PRESIDENT
ASST TO PRES

K

ASSOC VP
ASST VP
SPECIAL ASST
CHAIRPERSON
DIRECTOR
ADM ASST
CONTROLLER
BUDGET OFFICER
EXEC DIR
OMBUDSMAN
ASST TO PRES
OFFICER

(Mail Distribution Labels Cont.)

L

DIRECTORS
SUPERINTEND
ASST DIRECTORS
ASSOC DIRECTORS
ASSOC DEAN
COORDINATORS
ARCHITECT
EDITORS
MANAGERS
REGISTRAR
EXC DIR
ENGINEER
ADMINISTRATOR
ASST MANAGERS
ASST CONT

M

COORDINATORS
ASSOC DIRS
ASST DIRS
SUPERVISORS
AREA DIRS
ASST MGRS
MANAGERS
ASSOC EDITORS
DIRECTORS
CURATORS
SUPERINTENDENTS
FIN ANALYST
PUR AGENT
CHIEF ACCT
ANALYST
ACCT SUPERVISOR

(Mail Distribution Labels Cont.)

- III. ORDERING OF LABELS - Send a memo requesting labels, signed by the Department Chairman or authorized representative, to Administrative Data Processing Department, Room 2 Administration Building.

See Exhibit I, page 240.7 for example of requesting memo.

If you wish a cost estimate prior to the production of the labels, please note "Cost Estimate" in the subject section of your memo. An estimate will be prepared and your approval required before the labels can be produced.

If an estimate is not needed, your labels will be produced according to your specifications.

IV. USE AND DISTRIBUTION

A. The labels are pressure sensitive and easily attached to an envelope or on the front of the document to be mailed.

B. The address contains:

1. Administrative title (position)
2. College, office, or department
3. Sub-unit of college, office, or department
4. Distribution code as indicated in the following example:

Chairman
College of Agriculture
Department of Forestry
D-M

(Mail Distribution Labels Cont.)

C. The distribution code indicates the range of individuals to whom documents are to be mailed. Examples:

<u>CODE</u>	<u>CODE FOR WHICH LABELS WERE MADE</u>
D	D
A-D	A, B, C, D (ALL ACADEMIC)
D,M	D & M
M	M
J-M	J, K, L, M (ALL NON-ACADEMIC)
A-D, J-M	ALL (ACADEMIC & NON-ACADEMIC)

IV. NUMBER OF LABELS - The number of labels that will be printed will vary as administrative positions are adjusted. Currently, the number of labels produced for each distribution is as follows:

A - 35
B - 61
C - 195
D - 19

Total Academic 310

J - 11
K - 24
L - 46
M - 111

Total Non-Academic 192

TOTAL OF ALL CODES 502

(Mail Distribution Labels Cont.)

- V. CHANGES - Operating units should contact the Campus Mail Service,
(telephone 355-8294) to initiate changes to the labels.

(Mail Distribution Labels Cont.)

EXHIBIT I

Date: _____

TO: Administrative Data Processing
 2 Administration Building

FROM: (As Appropriate)

SUBJECT: Mailing Labels

Please provide _____ set(s) of mailing labels, using the Manual of
Business Procedures' code(s) _____. Completed labels should be
delivered and charged to:

_____	Department
_____	Building Name and Office Number
_____	Account Number
_____	Project Code (if known)

Attention: _____

RADIO BROADCASTING DEPARTMENT

I. GENERAL - The Radio Broadcasting Department general office is located in Room 283, Communication Arts Building. Business hours are weekdays, 8:00 a.m. - 5:00 p.m.; however, staff members are on duty daily from 6:00 a.m. - 1:00 a.m. The office telephone number is 355-6540.

II. SERVICES OFFERED

- A. Instructional broadcasting to MSU students - Through the WKAR-FM sub-channel facilities, curricular materials may be broadcast to students in their homes and dormitories via private radio receivers assigned to the students. For further information, call the General Manager.
- B. Preparing tape/cassette recordings for instructional purposes - Arrangements made through Office of Operations Director.
- C. High-speed tape duplication - Rate schedules and additional information available through Office of Operations Director.
- D. Recorded copies of many of the National Public Radio (NPR) programs broadcast on WKAR Radio are available for purchase. Arrangements made through Office of Operations Director.
- E. Frequency measurements, 10 Hz to 110 MHz - Arrangements made through Office of Chief Engineer.
- F. Consultation and advice on purchase and installation of audio recorders and other studio equipment, two-way radio systems, and interpretation of FCC Rules and Regulations - Arrangements made through Office of Chief Engineer.

III. FORMS TO BE USED - Initial contact should be by telephone. Radio Broadcasting Department will provide the appropriate form for the service requested.

IV. STATEMENTS - On completion of service - Journal Entry Request (University Stores Stock #140-2528) will be sent to Accounting Department. Duplicate copy will be sent to department ordering service.

Michigan State University
MANUAL OF BUSINESS PROCEDURES

UNIVERSITY PRINTING

1. Location & Hours

1. University Printing, Telephone No. 355-6610, is located in the Central Services Building. Office hours are Monday through Friday, from 7:30 to 12:00 a.m. and 12:30 to 5:00 p.m.

2. Services Provided

1. Through the use of a University account number, charged on a time and materials basis, University Printing offers the following services to all departments on campus:
 - a) offset duplicating or printing;
 - b) typesetting, pasteup and keylining;
 - c) camera and platemaking for the reproduction of;
 - 1) booklets, business cards, business reply envelopes, form letters, index cards, illustrated brochures, maps, memo pads, newsletters, postal cards, ruled forms, consecutively numbered forms or sets, stationery and other related items from a choice of all weights and colors of paper;
 - 2) collating, folding, hole drilling, padding, paper cutting, perfect binding, stapling and other related finishing operations;
 - 3) soft covering for books.
2. University Printing is the official source of University stationery.
3. Phototypesetting equipment with communications options for computers and word processors will be available after September 1982.
4. A photographic duplicate (called a PMT) of your artwork, form or type can be reproduced. The camera will accommodate originals as large as 28" x 38". The camera range is from 200% enlargement to 20% reduction. The largest duplicate print is 14" x 24". Screen prints can be reproduced using this process.

3. Ordering

1. Printing orders can be requested via Campus Mail Service, accompanied by a memo containing the following information:
 - a) account number to be charged;
 - b) quantity;

3. Ordering (Continued)

- c) name and telephone number of a person to contact in case additional information is needed;
- d) room number and building where finished job is to be delivered;
- e) a sample of the item to be printed, if it is a rerun or repeat job;
- f) instructions concerning color of paper or ink color, printing on one or both sides; and
- g) date when job is needed.

2. More complex jobs should be covered by a personal visit to the office of University Printing.

4. Copy Centers

1. There are seven copy centers operated by University Printing to provide convenient and fast duplicating and collating service to all units on campus on a first-come, first-serve basis:

- a) Agriculture Hall, Room 47, Telephone No. 355-1918;
- b) Anthony Hall, Room 116, Telephone No. 353-7796;
- c) Berkey Hall, Room 10, Telephone No. 355-6621;
- d) Eppley Center, Room 5, Telephone No. 353-7250;
- e) East Fee Hall, Room E-111, Telephone No. 353-6667;
- f) Life Science, Room B200, Telephone No. 353-8716;
- g) Natural Science, Room 133, Telephone No. 353-3911.

2. Requests for copying service can be made by:

- a) completing an order form at the corresponding Copy Center; or
- b) If the order is sent via Campus Mail Service, a memo supplying the information is required by University Printing.

5. Proofreading

1. A copy of the material to be proofread can be reviewed at University Printing, or it will be sent to the department via Campus Mail Service. Silverprints are available upon request. The proof and original copy must be returned marked approved or with corrections indicated to University Printing.

2. Proofreading is the sole responsibility of the department requesting the printing order.

6. Delivery of Job

1. University Printing delivery services is provided in conjunction with MSU Stores.
2. For the convenience of the ordering department finished material may be picked up at University printing.
3. A numbered receipt will accompany each delivery and must be signed by a person authorized to receive the delivery.

7. Charges

1. University Printing charges all services on a time and materials basis and has no provisions for cash transactions; therefore, payment is accomplished by a charge to departmental accounts.
2. Responsibility for requests for service to be charged against any account number rests upon the department having jurisdiction over expenditures charged against that account number. Only such services as can be paid out of favorable balances are to be requested.

8. Statements

1. Departments will be furnished a monthly statement showing a brief job title and description and total cost charged to the account. A cut-off date of the 25th has been established to facilitate posting of account charges for all months except June, which is extended to the 30th. Charges for jobs completed between the 25th and the last day of the month will be posted to the following month.
2. The total of all job charges against an account number for the month will be posted to the monthly Fund Ledger issued by the Accounting Department, Office of the Controller. If the total shown on the monthly statement submitted by University Printing does not agree with the amount shown on the Fund Ledger, the department should advise the Office of the Controller, Accounting Department, Telephone No. 355-5000.

(Fellowship and Traineeship Appointments Cont.)

- B. Recipients of Post Doctoral Fellowship Awards will be paid through the Office of Contract and Grant Administration.
- C. Authorization for payment of stipends is provided by the approved fellowship appointment form. To maintain proper accounting control over the accounts, no payments can be made until the appointment form is properly completed, signed (the signature of the Dean of The Graduate School is no longer required), and received by the Fellowship Section of Contract and Grant Administration.

IV. FEES

If the fellowship appointment provides for payment of fees, the student will receive this credit at the time of registration.

V. AMENDMENT OR TERMINATION

Fellowship or traineeship appointments may be amended or terminated by preparing a new appointment form. A space is provided to indicate the reason for the amendment or termination.

VI. OATH CARDS

Persons appointed to a fellowship or traineeship are not required to sign oath cards.

MANUAL OF BUSINESS PROCEDURES - VOLUME II

Michigan State University

Index - Continued

Service Areas

Leasing Office Machines	255.3
Library Copy Center	235.1
Library - Database Searching Service	236.1
Mail Distribution Labels	240.1
Motor Pool	245.1
MSU Press	250.1
Oath Cards	305.2
Office Services	255.1
Patents	315.10
Photo Lab	265.1
Physical Plant	260.1
Postage	325.1
Printing, University	285.1
Publications, Jointly Funded	330.1
Publications of Materials	205.5
Publications, University	290.1
Purchasing	270.1
Radio Broadcasting	275.1
Retention of Fiscal Records	335.1
Retention of Non-Fiscal Records	340.1
Returning Merchandise to Vendor	270.6
Scholarship and Loan Fund	315.5