

# Faculty Achievement Award in Research (FAAR) Participation Form

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## School of Medicine Campus End User Instructions – Associate Dean for Research and Faculty Affairs

### FORM – Faculty Achievement Award in Research (FAAR) Participation

**Use:** This form must be completed to establish the eligibility of an individual faculty member to receive a FAAR payment. For more information about the FAAR Program, reference the memorandum dated October 19, 2007 from J. Kevin Dorsey, M.D., Ph.D., Dean and Provost. [view memo >](#)

**Special Note:** An Award cannot be paid unless this form is completed and returned by the department to Human Resources prior to the established due date (May 15, 2009). No exceptions are possible.

**Due Date:** Eligibility of the faculty member requires that the completed signed form be returned to Human Resources by May 15, 2009.

**Access:** Access the form via the Associate Dean for Research and Faculty Affairs website at <http://www.siumed.edu/adrfaf/>. Adobe Reader software (Version 8.0 or higher) must be installed on your computer to allow you to access the form. If you do not have Adobe Reader software, go to the Adobe home page at <http://www.adobe.com> to download the software or contact your LAN administrator.

**Instructions:** Complete the form using the following instructions. Unless noted, all fields are **REQUIRED**.

Employee Information Section: Provide information about the faculty member and their department.

<i>Employee Name</i>	Enter the name of the employee.
<i>Employee ID Number</i>	Enter the AIS HRMS identification number for the employee.
<i>Tenure Department</i>	Enter the Tenure Department of the faculty member.
<i>Percentage</i>	If the employee is paid through an Institute, indicate the percentage of appointment in the Tenure Department.
<i>Institute</i>	If applicable, enter the Institute of the faculty member.
<i>Percentage</i>	If the Institute field is completed, indicate the percentage of appointment in the Institute.

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## *Special Note: Institute Percentage*

If the institute field is completed, then the percentage fields for the tenure department and institute must be completed. These percentages must total to 100%.

## *Faculty Member Signature*

The faculty member must sign the form

## *Date*

The date the faculty member signed the form.

## *Award Subject to Performance Benchmarks Defined as Position Description or Other (Specify)*

The performance benchmarks used to determine faculty member's eligibility for the FAAR payment.

## *Performance Standards Discussed at Annual Evaluation of Prior Year (Date)*

The prior year's annual evaluation date that performance benchmarks were discussed.

## *Department Chair's Initials*

The department chair initials to indicate agreement.

## *Faculty Member's Initials*

The faculty member receiving the FAAR payment initials to indicate agreement.

Eligibility Information Section: Provide information regarding the potential award amount.

### *1. Base salary*

The faculty member's base, FTE adjusted salary. Obtain from FAAR report.

### *2. Maximal Earned FAAR*

Leave blank. The field automatically calculates the maximal potential FAAR amount (25% of base salary).

### *3. Maximal Gross FAAR Payment*

Leave blank. The field automatically deducts the standard fringe benefits charge.

Approvals Information Section: Acquire the necessary approvals.

## *Department Chair*

The signature of the faculty member's Tenure Department Chair.

## *Date*

The date the Tenure Department Chair signed the form.

## *Assoc. Dean for Research and Faculty Affairs*

The signature of the Associate Dean for Research and Faculty Affairs.

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*Date* The date the Associate Dean for Research and Faculty Affairs signed the form.

*Institute Director (If applicable)*  
If the faculty member is associated with an Institute, the signature of the Institute Director.

*Date* The date the Institute Director signed the form.

*Dean and Provost Signature*  
The signature of the Dean and Provost.

*Special Note: Dean and Provost Signature*  
The Dean's signature is required if the Participation Form is being completed for a Department Chair or Institute Director.

*Date* The date the Dean and Provost signed the form.

**Special Notes:** Please consider the following:

- If applicable, it is the responsibility of the department to obtain the signature of the Institute Director.
- If applicable, the Associate Dean for Research will obtain the signature of the Dean and Provost.

**Routing:** Please follow the following routing procedure:

1. The department completes and obtains signatures of the faculty member, Department Chair and, if applicable, Institute Director.
2. The form is then delivered to the Office of the Associate Dean for Research and Faculty Affairs.
3. The Associate Dean for Research and Faculty Affairs will review, sign, obtain the Dean's signature if necessary, and return the completed form to the Department.
4. The Department will review and forward to Human Resources by the due date.