

CFAES Release Time / Cost Share (RT/CS)

Rev. Jan 2016
Version 4.0

The **CFAES Release Time / Cost Share** Form is used to request participation on an OSP research project. Release Time results in direct costs to grant funds and return to departments, while Cost Share provides matching contribution from department funds. RT/CS may be paid from Teaching, Research, or Extension appointments. This form can also be used for Extension direct appointments.

When to use this Form:

- College/ OARDC Academic: for Faculty use only; Staff time handled at dept level using HRA.
- OSU Extension: Orgs 55 and 57 for Faculty or Staff use.

Time Period: Specify the entire time period to be released or cost shared, including prior pay periods if any. Start dates more than 90 days prior to the current pay period are subject to college/unit administrative review. End dates should not extend beyond the OSP project end date per PI Portal. OSP project/grant extensions do not alter the original RT/CS end date, but require a RT/CS change request.

HR System: Submission and approval of this RT/CS will generate a funding line (DBT) change and/or retroactive adjustment (DRD) for up to three months prior, depending on HR Service Center deadlines. Any adjustments over 90 days require special OSP approval and can be delayed or denied. Employees will be returned to their original department funding lines after the end of the RT/CS period (no form needed).

Part I: Type

- New
- Change or Terminate early

DIRECT APPT

(Direct or RT)

or

COST SHARE

(OSU Matching)

Today's Date: _____

Only one project per form

Part II: Employee Information

Last Name _____ First, middle/initial _____ OSU employee ID _____

Part III: Current Appointment

- a. Home Department Org # _____
- b. Total appointment FTE _____ %
- c. Faculty Appointment:
 - 12 months
 - 9 months -off duty term is:
 - Autumn Spring Summer

Part IV: RT/CS Project participation

- a. OSP research Project number _____
 OSP Project End date in PI Portal _____
- b. Effort Time period :
 Start date _____ End date _____
- c. Percent RT/CS/Direct _____
- OR** amount of Total Salary & Benefits \$ _____

Part V: Chartfield Info - Identify which funding source is being released or costshared.

| a. Org # | b. Fund | c. Project | d. Program | e. UserDef | f. RT/CS % |
|----------|---------|------------|------------|------------|------------|
| | | | | | |
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Comments:

Part VI: Approvals and Signatures

Contact for questions: _____ Phone: _____

E-mail: _____

Employee signature Date

PI signature Date

Supervisor signature and printed name Date

Admin approval and printed name Date

Completed forms should be submitted via email to lemaste.124@osu.edu and keesor.1@osu.edu.

Questions: Angie LeMaster, lemaste.124@osu.edu, 614-292-6470 or Laura Keesor, keesor.1@osu.edu, 614-292-8873.