



Extraordinary Expenses for Grant and Contract-Funded Employees (Policy # 86): Request for Reimbursement

Tri-Agency

Step 1: Complete Employee and Grant-holder Contact Detail:

For claims related to severance/working notice: Please indicate the name of Employee, ID, salary, the current PG for which salary expenses are paid from, and including your contact information.

For claims related to general illness or sick leave: Please indicate the name of the Employee, ID, salary the PG for which salary expenses due to illness or sick leave were paid from, and including your contact information.

A. Name of Employee \_\_\_\_\_

Employee I.D. # \_\_\_\_\_

Current Annual Salary (\$) \_\_\_\_\_

Salary Expense: *Please refer to Note (a) on page 2 to check if fund source is considered Tri-Agency.*

Fund	Speed Chart	Fund Code	PG
1			
2			
3			
4			

B. Grant-Holder Name \_\_\_\_\_

Email and Phone # \_\_\_\_\_

Department/Unit \_\_\_\_\_

Step 2: Reason for Request for Funding (please check one 

Payment for Severance or Working Notice

Please supply the following documentation and information related to the financial status and future of the grant(s) or contract(s) in question. Copies of any layoff/working notice(s) and related documents would be beneficial to avoid delays in payment.

- Letter from granting agency that funds have been discontinued or reduced
- Length of severance or working notice period:

Start of severance/notice period: \_\_\_\_\_

End of severance/notice period: \_\_\_\_\_

- Portion of the severance or working notice period that EEF funding is being requested for
- Confirmation that alternate funding sources are not available to fund the severance or working notice period requested
- Severance or working notice agreement letter with terms outlined and signed off by employee

General Illness or Sick Leave

Please apply only if the short term paid sick leave has been exhausted and is longer than one-month. Include dates of paid short-term sick leave (not to exceed six months).

Start of short-term sick leave: \_\_\_\_\_

End of short-term sick leave: \_\_\_\_\_



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**👉 Maternity/Parental/Adoption SEB Top-up**

For Maternity/Parental/Adoption SEB Top-up, please **do not complete this application**.

Once you submit the appropriate appointment form information to Payroll, any top-up benefits will automatically be paid from the extraordinary expense funds.

For Postdoctoral fellows, please complete the [Maternity/Parental/Adoption Leave Application form](#) and submit to your department administrator.

**Step 3: Submit Form, Supporting Documents, and Sign-off**

- Complete, sign and attach supporting documents to the form and submit to:

**Extraordinary Expense Fund Request**

C/O UBC Human Resources: Janet McHugh, Benefits Administrator  
6<sup>th</sup> Floor – TEF III  
6190 Agronomy Road  
Vancouver, BC V6T 1Z3

- Human Resources will review your completed form and supporting documentation to determine if funding is approved and will forward to Payroll for reimbursement. Payroll will confirm with the Researcher or Grant Holder the approved reimbursement with a copy of the Journal Voucher (JV) or confirming change in salary expense to be paid from the extraordinary expense fund.
- For any questions regarding your request for funds or the extraordinary expense fund (policy #86) please contact Janet McHugh at 604-822-6823 or [janet.mchugh@ubc.ca](mailto:janet.mchugh@ubc.ca)
  - Link to policy: <http://www.universitycounsel.ubc.ca/policies/policy86.pdf>

\_\_\_\_\_  
**Signature of Grant Holder**

\_\_\_\_\_  
**Date**

Tri-Agency Fund Codes

- R0017
- R0070
- R7000 to R7999
- R8000 to R8999
- R9000 to R9998

**For use by Human Resources and Payroll (Financial Services)**

\_\_\_\_\_  
**Approval: Human Resources** *(Print Name & Signature)*

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Reimbursement Completed: Payroll (Financial Operations)**  
*(Print Name & Signature)*

\_\_\_\_\_  
**Date**