INSTRUCTIONS FOR COMPLETING THE APW FOR
UNIT 18 LECTURERS BYA PAYMENTS IN AY

A By-Agreement memo signed by the Dean and an Academic Payroll Worksheet should be completed by the department facilitating the payment and submitted to APO Analysts: Christine Lima and Kimberly Yanogacio. Please refer to January 2026 APO Announcements for the standardized Box process for submitting a request: New Process for Offline GLAAS Appointments.

The APW can be found Payroll Services' website here. and a By-Agreement memo sample is included at the end of these instructions.

University of California, Merced
ACADEMIC PAYROLL WORKSHEET

POSITION NO:
_____

Revision Date:

EMPLOYEE AND SCHOOL INFORMATION

EMPLOYEE ID

NAME (LAST, FIRST MIDDLE)

EMAIL ADDRESS

RESEARCH (Y/N)

CURRENT POSITION/JOB *(BLANK if N/A)*

REPORTS TO

DEPARTMENT CODE/NAME

LOCATION/BUILDING

CUBICLE/ROOM

TRS SUPERVISOR *(BLANK if N/A)*   TRS BACK UP SUPERVISOR *(BLANK if N/A)*   TRS OPTIONAL BACK UP SUPERVISOR *(BLANK if N/A)*

POSITION No.:	TBD
EMPLOYEE ID:	See UCPath
NAME:	See UCPath
EMAIL ADDRESS:	UC Merced Directory or See UCPath
RESEARCH: N/A	N/A
CURRENT POSITION/JOB:	See UCPath
REPORTS TO:	Dean
LOCATION/BUILDING:	Required
CUBICLE/ROOM:	Required
TRS SUPERVISORS:	Not Required

ACTION AND JOB INFORMATION

NEW HIRE		RE-HIRE		CONCURRENT HIRE	
	EFFECTIVE DATE		EFFECTIVE DATE		EFFECTIVE DATE
SERIES CHANGE		STEP / OFF SCALE CHANGE		PROMOTION	
	EFFECTIVE DATE		EFFECTIVE DATE		EFFECTIVE DATE
REAPPOINT		FTE CHANGE		INTERDEPARTMENTAL TRANSFER	
	EFFECTIVE DATE		EFFECTIVE DATE		EFFECTIVE DATE

JOB CODE/TITLE	DURATION OF APPOINTMENT	POSTDOC ANNIVERSARY DATE *(BLANK if N/A)*

COMP FREQUENCY	COMP RATE CODE	STEP	% TIME	JOB END DATE	AUTO END

ANNUAL BASE	+	OFF/ABOVE SCALE	=	0.00 TOTAL COMPENSATION	0.00 MONTHLY RATE	HOURLY RATE

Choose one of the options below (usually "Concurrent Hire") and enter the date the work will begin.

	Has an appt in UCPath?	Active?	Current Position Unit 18 Lecturer?
New Hire	**No**	N/A	N/A
Re-Hire	Yes	**No**	N/A
Concurrent Hire	Yes	Yes	Yes
Series Change	Yes	Yes	**No**

Job Code/Title	1650 LECT-MISCELLANEOUS/PART TIME
Duration of Appointment	End Date (Academic Term Appts)
Postdoc Anniversary Date:	LEAVE BLANK
Comp. Frequency	A-Annual
Comp Rate Code	Without Salary-Record Only
Step	LEAVE BLANK
% Time	LEAVE BLANK
Job End Date	Date work ended
Auto End	Yes
Annual Base	Salary on 7/1from UCPath
Off/Above Scale	Leave Blank
Total Compensation	Autofill
Monthly Rate	Autofill
Hourly Rate	From UCPath

PAY DISTRIBUTION				
EARN CODE	PAY START DATE	PAY END DATE	AMOUNT	ACTUAL SALARY

FUNDING (Chart String Format: Entity-Fund-FinancialHRUnit-Account-Function-Program-Project-PhyscalLocation-Sub)				
		DIST %	BEGIN DATE	END DATE
Chart String				
Chart String				
Chart String				
Chart String				

DEGREES, SPECIALTIES & PRIOR SERVICE

The Unit 18 Lecturer must receive at least the same hourly rate as their July 1 salary. This can be determined by dividing their annual rate by 2088 or checking UCPath Workforce Job Summary. Multiply the hourly rate by the amount of hour they will be working. The amount being paid should be equal to or more than the calculated amount.

Each **month** must be entered on a separate line in the Pay Distributions Section. If preferred, you may complete an Additional Pay Form instead of completing the Pay Distribution section of the Academic Payroll Worksheet.

EXAMPLE:

EARN CODE	PAY START DATE	PAY END DATE	AMOUNT	ACTUAL SALARY
RFA	5/17/2025	5/31/2025	$50	$50
RFA	6/1/2025	6/30/2025	$100	$100
RFA	7/1/2025	7/31/2025	$100	$100
RFA	8/1/2025	8/20/2025	$50	$50

Earn Code	RFA
Pay Start Date	Date work will begin
Pay End Date	Date work will end
Amount	$ amount of monthly payment
Actual Salary	Same as Amount

Chart String	9 segment CCOA
Dist %	Must total 100%
Begin Date	Start Date for CCoA to be charged. For the first line this should be the same date as the Concurrent Hire (or other submission type) date. For the remaining lines it should be the first of the month.
End Date	End Date for CcoA to be charged. On the last line, this should be the same as the Job End Date. One the lines above, it should be the last day of each month.

DEGREES, SPECIALTIES & PRIOR SERVICE

DEGREE _____ DEGREE YEAR _____ DEGREE INSTITUTION _____ TERMINAL (Y/N) ____

DEGREE/EDUCATION FIELD _____

CURRENT SPECIALTY _____

UC PRIOR SERVICE *(If COLLEGE/UNIVERSITY, fill in Degree Institution Code)*

PRIOR INSTITUTION _____

COMMENT *(160 Character Max)*

PREPARER NAME / DATE	APPROVER NAME / DATE

Degree	*This section only required for New Hires*
Degree Year	
Degree Institution	
Terminal	
Degree/Education Field	
Current Specialty	
UC Prior Service	
Prior Institution	

Save the document and sign and date.

Submit the APW and BYA agreement to your APO Analysts: Christine Lima and Kimberly Yanogacio. Please refer to January 2026 APO Announcements for the standardized Box process for submitting a request: New Process for Offline GLAAS Appointments.

UNIVERSITY OF CALIFORNIA,
MERCED 5200 NORTH LAKE ROAD
MERCED, CA 95343

DATE
LECTURER'S NAME, JOB TITLE
UCM EMAIL

Dear LECTURER'S NAME,

Thank you for your participation in the NAME OF ACTIVITY.

Pursuant to Article 21 Section B.6.2 of the collective bargaining agreement between the University Council, American Federation of Teacher (UC-AFT) and the University of California, this is a By-Agreement (BYA) appointment and is in addition to your Lecturer Appointment with the DEPT, SCHOOL.

 Specific dates, expected duties and time commitment for this activity are:
- Activity 1
- Activity 2
- Activity 3

You will be compensated for this work at an hourly rate of $AMOUNT to be paid in 1 lump sum payment on DATE. You will be compensated up to a maximum of X hours for this activity. This rate is based on your academic-year annual rate, per Article 24.B "Other Assigned Duties" of the UC-AFT bargaining agreement. You will be expected to keep track of the number of hours worked and report them to DEPT CHAIR NAME (DEPT CHAIR EMAIL ADDRESS) in order to meet payroll deadlines. This salary is subject to such deductions as may be required pursuant to applicable laws and regulations.

Thank you again for your participation in service of UC Merced's mission. This activity is supported as a one-time exception, and not precedent setting as compensated service for future activities.

 Sincerely,

DEAN'S NAME, Dean
School

cc:
NAME, Senior Academic Personnel Analyst, Academic Personnel Office
NAME, Academic Personnel Analyst, Academic Personnel Office
DEPT CHAIR NAME, TITLE(S)
SCHOOL PERSONNEL NAME, SCHOOL PERSONNEL TITLE