SUBSTITUTION PAY INITIATION FORM  Note: Substitution Forms cannot be used for Management employees substituting to other Management positions.							
Is this new?	Is this an ame	endment?					
Name of Supervisor:		Phone #	:				
Section 1 – Details of Substituting Employee's Base Position (Complete Sections 1 & 2 and forward to Expense Authority)							
Last Name:			First Name:				
Office Name:		Departn	Department ID:				
Employee Number:	Employee Number:		Classification & Step:				
Section 2 – Substituting For:							
Last Name:			First Name:				
Classification:		Position	Position Number:				
First Day:		Last Day:					
Reason:							
Section 3 – Overtime Worked During Substitution Periods							
Paid at: Substitution Rate		All Hours or	Partia	al Specify			
Base Rate		All Hours or	Partia	al Specify			
Work Pattern (check one)							
7 hour work day			7.5 hour work day				
7.78 hour work day			8 days at 7.75 hours and 1 day at 8 hours				
(1 day off every 2 weeks) *		(1 day off every 2 weeks)* Specify 8 hour day		hour day			
Other, please describe:							
*Indicate the first earned day off in the substitution period (Y/M/D):							
If the substitution is for less than ful basis in the space provided (e.g., nu				•	ll on a bi-weekly		
Section 4 – Substitution Calculation				,,,,			
Base Salary Range and Step:		<u>Calcul</u>					
Base Salary Rate							
Salary Protection (if applicable)		δТ	otal Bi-we	eekly Salary =			
TMA (if applicable – GEU/Schedule A only)					X 1.08		
<b>◊Total Bi-weekly Salary =</b>				8% Increase =			
Substitution Classification & Range	Clo	Closest Step to 8% Increase (before TMA) is: Step at					
			TMA/RF	RA amount (if applicable)			
Culturation Total if access 00/	Cla	assification Adjust	ment (if ap	plicable example on next page)			
Substitution Total if over 8% (only if substituting into Mgmt, and authorized by Expense Authority)				Substitution Total:			



#### Name of Expense Authority:

Approved:

You must ensure the "Approved" box is checked or Payroll will not process your request.

Comments:

Section 5 - To be completed by the Pay Office

Add to pay amount (\$):

### **Instructions for Completion of Form**

Please fill this form out and save it, then submit it through <u>AskMyHR</u> using the categories: **Myself** (or) **My Team** or Organization > Submit a Form or Document > Pay/Overtime Form

# Sample Substitution Pay Calculation - Classification Adjustment (CAD) as per BCGEU Article 27.4(f)

Base Position: Clerk R9, Step 5 Bi-weekly Salary: \$2,104.28 Substituting For: Clerk R15

**8% Calculation:** \$2,104.28 x 1.08 = \$2,272.62

#### Clerk R15 Salaries:

Step 1	Step 2	Step 3	Step 4	Step 5
\$2,196.17	\$2,257.46	\$2,320.84	\$2,386.26	\$2,483.98

The closest step to 8% above the employee's base rate = Step 2 at \$2,257.46

## Clerk R12 Salaries:

Step 1	Step 2	Step 3	Step 4	Step 5
\$2,023.94	\$2,079.48	\$2,136.88	\$2,196.17	\$2,284.76

The closest step to 8% above the employee's base rate = Step 5 at \$2,284.76

As per BCGEU Article 27.4(f), the employee would make more money substituting at a lower classification level; therefore, they will be paid a classification adjustment (CAD). The classification must be in the same classification series as the employee's base position or the position they are substituting into.

Substitution Rate: Clerk R15, Step 2 (\$2,257.46)

Classification Adjustment (CAD): \$2,284.76 (Clk 12, Step 5) - \$2,257.46 (Clk 15, Step 2) = \$27.30

Freedom of Information and Protection of Privacy Act (FOIPPA): This information is collected by the BC Public Service Agency under s. 26(c) of FOIPPA for the purposes of facilitating the processing of payroll services. If you have any questions regarding the collection of your information please submit a request to AskMyHR at <a href="www.gov.bc.ca/myhr/contact">www.gov.bc.ca/myhr/contact</a> (by selecting My Team / Organization > Employee & Labour Relations > Other Issues & Inquires) or call 1-877-277-0772.