# YSM Finance and Administration Forms Management Application

Revised: 02/13/2024

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#### **Overview**

This is a user guide for the YSM Finance and Administration Forms Management system. In this application, individuals will be able to submit online forms to initiate workflow with a series of approval steps.

#### 1.0 Submit a Form – YSM Faculty Extra Compensation Request

Select the link to access the portal https://yale-medicine.my.site.com/financeandadmin/s/request-forms

- 1. This page displays a list of available forms; select the approval request form you want to use.
- 2. The form selected will populate on the screen. The form is made of several fields to capture information about the YSM Faculty Extra Compensation Request approval request.
- 3. Key things to note in this form:
  - The fields marked with a red asterisk (\*) are required. Enter the required fields and any other necessary fields.
  - $\circ$   $\;$  The system does not pull in the Submitter name and email, you will need to type that in.
  - There are some validations the system looks for. For example, submitter's email requires a valid **@yale.edu** address.
    - If you enter a non-yale email address and click submit, the system will display a validation message.
  - $\circ$   $\;$  If dollar amount is required for a field, for example enter 125.25.
  - o If there is an error, you will see the validation messages when you select Submit.
  - The **Faculty Home Department** is pre-populated. Select the department from the list by scrolling down the list or typing the name to narrow down the list.
    - Note: This list is a query directly from Salesforce that is daily populated from the PeopleHub data.
  - The **Faculty Member** list is populated based on the Faculty Home Department picked.
  - The **Position/Rank** is a static list, users will need to pick one.
    - Note: There is a dynamic conditional logic in place. If you select "other," a response field will be displayed, and you will be required to enter some text.

| Position/Rank *                  | Other                | ~ |
|----------------------------------|----------------------|---|
| Provide Position/Rank if Other * | 255 characters left. |   |

• Multi line entry is supported in the space provided for the following questions.

| In the space below, please provide a comprehensive description of the work to be  |     |
|---|-----|
| performed *   |     |
|   |     |
|   |     |
|   |     |
|   |     |
|   |     |
|   |     |
|   | 1   |
|   |     |
| In the space below, please provide the basis for determining the payment amount * |     |
|   |     |
|   |     |
|   |     |
|   |     |
|   |     |
|   |     |
|   | 1   |
|   |     |
| In the space below, please provide when pay should be received *                  |     |
|   |     |
|   |     |
|   |     |
|   | _// |

• Will this payment be charged to a sponsored award? – if you select YES, you are required to attach a file.

| Will this payment be charged to a sponsored award? $\circ$ Ves $ m O$ No   |
|--|
| If yes, please attach the confirmation of OSP's review. In addition, include the section of the proposal budget and budget justification submitted to the sponsor that identifies the individual and their role on the project. If the compensation was not detailed in the original budget/justification, then attach approval from the sponsor for the compensation. |
| Choose File No file chosen   |
| Add another file   |

- $\circ$  You can attach as many files as you want. Currently there are no restrictions.
  - To add attach a file, select the Choose File button. Navigate through your device's file folder to locate the appropriate file. Select the Open button to attach the file. You will now see the document name next to Choose File.
  - To attach additional files, select **Add another file** link on the right.
  - To delete any attached file, select the Remove link next to the file.
- 4. Once all the fields are filled out, select **Submit**.
- 5. The confirmation message will be displayed.

| Thank you for your YSM Faculty Extra Compensation Request submission.<br>You will shortly receive an email confirmation of your submission. |
|---|
|---|

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#### Faculty Compensation Above Salary Request Form

Faculty members in the School of Medicine may be paid for additional work such as on call pay, pay for additional shifts, lectures delivered to affiliated organizations or for taking on additional duties on an interim basis. Prior approval to pay defined, additional compensation in these circumstances must be obtained before this type of work is performed. For components that are defined in a department's compensation plan, approval of the compensation plan serves as the prior approval. In all other cases, prior approval must be obtained from the Dean's Office.

This form is to be used to request faculty compensation above salary for any arrangements that are not captured in a department's defined additional compensation plan. Prior approval for the arrangements must be obtained before an assignment begins.

| Submitter's Name *  |  |
|---|--|
|   |  |
| Submitter's Email *   |  |
|   |  |
| Faculty Home Department *   | Q  |
|   | -  |
| Faculty Request Department  | Q  |
| if different from Faculty Home  | -  |
| Department)   |  |
|   |  |
| Faculty Member *  | Q  |
|   |  |
| Position/Rank *   | Please select 🗸  |
|   |  |
| n the space below, please prov  | ide the basis for determining the payment amount *   |
| n the space below, please prov  | ide the basis for determining the payment amount *   |
| n the space below, please prov  | ide the basis for determining the payment amount *   |
| n the space below, please prov<br>n the space below, please prov<br>Additional Compensation Amo | ide the basis for determining the payment amount * ide when pay should be received * unt \$*   |
| In the space below, please prov   | ide the basis for determining the payment amount * ide when pay should be received * unt \$* of work:  |
| In the space below, please prov   | ide the basis for determining the payment amount * ide when pay should be received * unt \$* of work: nd *                                   |
| In the space below, please prov   | ide the basis for determining the payment amount * ide when pay should be received * unt \$* unt \$*   |
| In the space below, please prov   | ide the basis for determining the payment amount • ide when pay should be received * unt \$* of work: nd * o a sponsored award? * O Yes O No |
| In the space below, please prov   | ide the basis for determining the payment amount * ide when pay should be received * unt \$* of work: nd * o a sponsored award?* O Yes O No  |

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### 2.0 Submit a Form – YSM Spendable Gift

Select the link to access the portal https://yale-medicine.my.site.com/financeandadmin/s/request-forms

- 1. Select YSM Spendable Gift approval request from the list of available forms.
- 2. The form selected will populate on the screen. The form is made of several fields to capture information about the YSM Spendable Gift approval request.
- 3. Key things to note in this form:
  - The fields marked with a red asterisk (\*) are required. Enter the required fields and any other necessary fields.
  - o If there is an error, you will see the validation messages when you select Submit.
- 4. Fill in the from:
  - **Donor Name**, the system does not pull in the name from Salesforce, you will need to type that in.
  - Current Amount and Expected Future Deposits requires the dollar amount, for example enter 125 or 125.00.
  - **Deposit Date**, click in the field to select the date from the calendar.
  - Enter **COA information**.
    - Gift Revenue COA COA where gift revenue was deposited.
    - **Waiver Funding COA (if applicable)** Non-sponsored COA that will cover the amount of the assessment.
  - For Applicable Assessment % and Rate Being Requested % enter numbers 0.0 to 100.0 as a decimal.
  - Enter the details in the space provided for the Explanation/Justification section. Multi lines are supported.
  - For **Supporting Documents**, you can attach as many files as you want. Currently there are no restrictions.
    - To add attach a file, select the Choose File button. Navigate through your device's file folder to locate the appropriate file. Select the Open button to attach the file. You will now see the document name next to Choose File.
    - To attach additional files, select **Add another file** link on the right.
    - To delete any attached file, select the **Remove** link next to the file.
  - **Submitter's Name**, the system does not pull in the name from Salesforce, you will need to type that in.
  - **Submitter's Email**, there are some validations the system looks for. For example, submitter's email requires a valid @yale.edu address.
    - If you enter a non-yale email address and click submit, the system will display a validation message.
  - The **Department** is pre-populated. Select the department from the list by scrolling down the list or typing the name to narrow down the list.
  - The Faculty Name list is populated based on the Department picked.
- 5. Once all the fields are filled out, select **Submit**.
- 6. The confirmation message will be displayed.

### Yale school of medicine

#### YSM Gift Assessment Reduction or Waiver Request

This form is to request a waiver or reduction of the university and/or YSM assessment on gift revenue. The form is valid for up to two years from the date of approval or when the deposit amount has been met, whichever occurs first. Department Business Offices (DBO) are responsible for submitting the approved form to the YSM Controller's Office at ysmcontroller@yale.edu so that an adjustment can be processed. If the department is directly responsible for rebating the assessment to the gift, please process the adjustment within your DBO. For assistance with COA usage, please contact ysmcontroller@yale.edu. For requests related to sponsored projects, use 1306 FR.02 Facilities and Administrative ("F&A") Rate Reduction/Waiver Request | It's Your Yale

| Donor Name  | •   | Current<br>Amount | (\$) *    | Deposit Date *    | Expected Future<br>Deposits (\$) * |
|---|---|-------------------|-----------|-------------------|------------------------------------|
|   |   |                   |           |                   |                                    |
| Full COA  |   |                   |           |                   |                                    |
| Gift Assessm  | ent Informatior                                     | ן                 |           |                   |                                    |
| Applicable A  | ssessment % **                                      | *                 | Rate B    | eing Requested %* |                                    |
| 0.0   |   |                   | 0.0       |                   |                                    |
| 0.0 to 100.0 as a   | a decimal.  |                   | 0.0 to 10 | 0.0 as a decimal. |                                    |
|   |   |                   |           |                   |                                    |
|   |   |                   |           |                   |                                    |
| Supporting [<br>Choose Fil  | Documents<br>a No file chos                         | en                |           |                   |                                    |
| Supporting [<br>Choose Fil  | Documents<br>9 No file chos                         | en                |           |                   | Add another fi                     |
| Supporting [<br>Chaose Fil<br>Requestor In  | Documents<br>Pocuments<br>No file chos<br>formation | en                |           |                   | Add another fi                     |
| Supporting [<br>Choose Fil<br>Requestor In<br>Submitter's N   | Documents<br>No file chos<br>formation              | en                |           |                   | Add another fi                     |
| Supporting [<br>Choose Fil<br>Requestor In<br>Submitter's P   | Documents  No file chos formation Name *            | en                |           |                   | Add another fi                     |
| Supporting [<br>Choose Fil<br>Requestor In<br>Submitter's P<br>Submitter's B                              | Documents  Pormation Name                           | en                |           |                   | Add another fi                     |
| Supporting [<br>Choose Fil<br>Requestor In<br>Submitter's P<br>Submitter's E<br>Department                | Documents  No file chos formation Name Email*       | en<br>Q           |           |                   | Add another fi                     |
| Supporting I<br>Choose Fil<br>Requestor In<br>Submitter's N<br>Submitter's E<br>Department<br>Faculty Nam | Documents  No file chos  formation  Name  Email*  e | en<br>Q<br>Q      |           |                   | Add another fi                     |

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#### 3.0 Submit a Form – YSM Non-Sponsored Assessment or Waiver Request

Select the link to access the portal https://yale-medicine.my.site.com/financeandadmin/s/request-forms

- 1. Select YSM Non-Sponsored Assessment or Waiver Request approval from the list of available forms.
- 2. The form selected will populate on the screen. The form is made of several fields to capture information about the YSM Non-Sponsored Assessment or Waiver Request.
- 3. Key things to note in this form:
  - The fields marked with a red asterisk (\*) are required. Enter the required fields and any other necessary fields.
  - If there is an error, you will see the validation messages when you select Submit.
- 4. Fill in the from:
  - **Donor Name**, the system does not pull in the name from Salesforce, you will need to type that in.
  - Current Amount and Expected Future Deposits requires the dollar amount, for example enter 125 or 125.00.
  - **Deposit Date**, click in the field to select the date(a future date can be selected) from the calendar. This request for reduction or waiver can be submitted before the actual deposit.
  - Enter the Full COA.
  - For Applicable Assessment % and Rate Being Requested % enter numbers 0.0 to 100.0 as a decimal.
  - Enter the details in the space provided for the Explanation/Justification section. Multi lines are supported.
  - For **Supporting Documents**, you can attach as many files as you want. Currently there are no restrictions.
    - To add attach a file, select the Choose File button. Navigate through your device's file folder to locate the appropriate file. Select the Open button to attach the file. You will now see the document name next to Choose File.
    - To attach additional files, select **Add another file** link on the right.
    - To delete any attached file, select the **Remove** link next to the file.
  - **Submitter's Name**, the system does not pull in the name from Salesforce, you will need to type that in.
  - **Submitter's Email**, there are some validations the system looks for. For example, submitter's email requires a valid @yale.edu address.
    - If you enter a non-yale email address and click submit, the system will display a validation message.
  - The **Department** is pre-populated. Select the department from the list by scrolling down the list or typing the name to narrow down the list.
  - The Faculty Name list is populated based on the Department picked.
- 5. Once all the fields are filled out, select **Submit**.
- 6. The confirmation message will be displayed.
- 7. The flow is the same as the following section below.

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#### YSM Non-Sponsored Assessment Reduction or Waiver Request

This form is to request a waiver or reduction of the university and/or YSM assessment on non-sponsored revenue. The form is valid for up to two years from the date of approval or when the deposit amount has been met, whichever occurs first. Department Business Offices are responsible for submitting the approved form to the YSM Controller's Office at ysmcontroller@yale.edu so that an adjustment can be processed. For requests related to sponsored projects, use 1306 FR.02 Facilities and Administrative ("F&A") Rate Reduction/Waiver Request | It's Your Yale

| Contractor Name *   | Current<br>Amount (\$) *                                 | Deposit Date *              | Expected Future<br>Deposits (\$) *     |
|---|--|-----------------------------|--|
| Full COA  |  |                             |  |
| Non-Sponsored Funds A   | Assessment Information —                                 |                             |  |
| Assessment Type   | Applicable Assessm                                       | ent %** Rate                | Being Requested %                      |
| ′ale Medicine***  | 0.0  | 0.0                         |  |
| Dean's/Other  | 0.0 to 100.0 as a decima                                 | I. 0.0 to 10                | 0.0 as a decimal.                      |
|   | 0.0 to 100.0 as a decima                                 | l. 0.0 to 10                | 0.0 as a decimal.                      |
| * See YSM Revenue Ass<br>** Yale Medicine recom   | essment Chart at Finance a<br>mendation & approval is re | & Administration<br>quired. | < MyYSM (yale.edu)                     |
| rano box bolott, protia   | io an oxpranacion/jaccineaci                             |                             | ournonco do                            |
| ecessary, including bu<br>f contract, copy of bud   | t not limited to a copy of th<br>get: *                  | e contractor/don            | or's F&A policy, copy                  |
| ecessary, including bu<br>f contract, copy of bud<br>supporting Document  | t not limited to a copy of th<br>get: *                  | e contractor/don            | or's F&A policy, copy                  |
| ecessary, including bu<br>f contract, copy of bud<br>supporting Document<br><b>Choose File</b> No file o  | t not limited to a copy of th<br>get: *                  | e contractor/don            | or's F&A policy, copy                  |
| ecessary, including bu<br>f contract, copy of bud<br>Supporting Document<br>Choose File No file o<br>Requestor Information  | t not limited to a copy of th<br>get: *                  | e contractor/don            | or's F&A policy, copy                  |
| ecessary, including bu<br>f contract, copy of bud<br>supporting Document<br><b>Choose File</b> No file of<br>Requestor Information  | t not limited to a copy of th<br>get: *                  | e contractor/don            | or's F&A policy, copy                  |
| ecessary, including bu<br>f contract, copy of bud<br>supporting Document<br><b>Choose File</b> No file of<br>Requestor Information<br>submitter's Name *  | t not limited to a copy of th<br>get: *                  | e contractor/don            | or's F&A policy, copy<br>Add another f |
| ecessary, including bu<br>of contract, copy of bud<br>Supporting Document<br>Choose File No file of<br>Requestor Information<br>Submitter's Name *<br>Submitter's Email *                                 | t not limited to a copy of th<br>get:*  chosen           | e contractor/don            | Add another f                          |
| ecessary, including bu<br>of contract, copy of bud<br>supporting Document<br><b>Choose File</b> No file of<br>Requestor Information<br>submitter's Name *<br>submitter's Email *                          | t not limited to a copy of th<br>get:*  chosen  Q  Q  Q  | e contractor/don            | Add another f                          |
| ecessary, including bu<br>f contract, copy of bud<br>supporting Document<br><b>Choose File</b> No file of<br>equestor Information<br>ubmitter's Name *<br>ubmitter's Email *<br>Department<br>aculty Name | t not limited to a copy of th<br>get: *  Chosen  Q  Q  Q | e contractor/don            | Add another f                          |

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#### 4.0 Submitter's Email Notification

As a Submitter, you will receive an email notification of the approval request you submitted.

- 1. To view the email notification, go to your Outlook email and locate the notification.
- 2. Double click on the email to view the notification.
- 3. You will see the form submission with the following information:
  - Thank you for your submission with an Approval Request number and the form name.
  - o There is a link to view the submission details in a pdf form.
    - Select CLICK HERE and enter the Salesforce encrypted password given in the email to view the pdf.
    - This is a native pdf output from the system. You will see all the details you submitted.
  - A summary of your submission.
- 4. Close the email once you are done reviewing it.

| Thank You, your Approval Request AR00000042 - YSM FACULTY COMPENSATION ABOVE SALARY REQUEST has been received by the   |
|--|
| SH salesforce-health-no-reply@yale.edu<br>To ♥ Persaud, Devi   |
| Hello,   |
| Thank you for submitting Approval Request AR00000042 - YSM FACULTY COMPENSATION ABOVE SALARY REQUEST.                  |
| To view the details of request AR00000042 CLICK HERE (password: pqsHHjIf)  |
| Your request is being processed and you will be notified at this email address if any of the approvers have questions. |
| You will receive a confirmation once your request has been decisioned.   |
| Please keep note of your request number AR00000042 for future reference.   |
|  |
| Thank You,   |
| YSM Dean's Office  |

#### 5.0 Approval Request

The Approver(s) have three decisions they can make.

- Approve
- Request Additional Details Needs more information
- Deny

#### 6.0 Submitter Notification – Approved

As the Submitter, you will get an email notification when the Approver 'Approves' the request. You will receive an email notification with links to the submission form and to an approval detail.

- 1. To view the email notification, go to your **Outlook** and locate the notification.
- 2. Double click on the email to view the notification.
- 3. You will see links that you will be able to click on for additional information:
  - <u>CLICK HERE</u> for AR00000xxx submission (password: xxxxxx)
  - <u>CLICK HERE</u> for AR00000xxx approvals.

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- 4. You can proceed with the next steps for the request.
  - o YSM Faculty Extra Compensation Request Process Workday request
  - YSM Gift Assessment Reduction or Waiver Request forward the email to ysmcontroller@yale.edu
  - YSM Non-Sponsored Assessment Reduction or Waiver Request forward the email to <u>ysmcontroller@yale.edu</u>

#### 7.0 Submitter Notification – Needs Information

As the Submitter, you will get an email notification when the Approver request Additional Information Details. You can view the details of the request and see what additional information is needed from the approver.

- 1. To view the email notification, go to your **Outlook** and locate the notification.
- 2. Double click on the email to view the notification.
- 3. You will see the following information:
  - a. Additional information is requested, the request number and the type of request.
  - b. Link to the request form, Submitted On time stamp, Department, and Faculty Name.
  - c. Approver name, Approval State and Needed Information with the comments.
- 4. Go to the Need More Information section to view the notes pertaining to additional information needed.

Please provide Additional Information for your Request AR00000042 - YSM FACULTY COMPENSATION ABOVE SALARY REQUEST

| salesforce-health-no-reply@yale.edu<br>To © Persaud, Devi   |
|---|
| Hello,  |
| Additional information is requested in order to approve your request AR00000042 - YSM FACULTY COMPENSATION ABOVE SALARY REQUEST. Comments provided below. |
| To edit your request details <u>CUCK HERE</u> .   |
| Submitted On: 7/24/2023 4:00 PM   |
| Department: MEDFIN Finance and Administration   |
| Faculty Name: James E Rothman   |
|   |
| Approver: Persaud, Devi   |
| Approval Stage: YSM Deputy Dean, F&A  |
| Needed Information:   |
| test  |
|   |
| Thank You,  |
| YSM Dean's Office   |

- 5. To Edit your request, select **Click here** to provide the additional information requested by the reviewer.
  - a. It now opens the form prefilled with the same information originally submitted.
  - b. Update the information needed.
  - Prior attachments are not preloaded.
    - Note: The original attachments are saved in the system from initial submission and viewable to the approvers.
  - Attachments are optional here.
  - o Click the **Submit** button.
  - You will see your submission confirmation message.
  - And you will get another email notification.

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- 6. Open that email notification.
  - $\circ$   $\;$  Here is a thank you message for updating your approval request.
  - $\circ$   $\;$  The approval request number is the same.
  - You will get a different password to open the approval request because it is a new file.

#### 8.0 Submitter Notification – Denied Message

The Submitter receives a Denied message and views the details from the Approver.

- 1. Open the Submitter's Denied Message in **Outlook**.
- 2. In the Email notification you will see the reason your request is denied.
- 3. An email address is provided if you need to contact the department.
- 4. This request is closed and does not move to the next level of approval.