

TEMPLE UNIVERSITY
A Commonwealth University
Philadelphia, PA 19122

Office of the Dean
College of Liberal Arts

MEMORANDUM

To: CLA Administrators
From: Kathy Hunsberger
Date: March 31, 2011
Re: City Wage Tax Refunds Requests

Please submit any Spring, 2011 city wage tax refund requests for eligible full and part-time faculty **NO LATER THAN FRIDAY, APRIL 29, 2011**. A list of your full-time faculty should be submitted with the percentage of time spent at Ambler and on Main campus. To be eligible, the faculty member must live and teach outside the Philadelphia area. For each faculty member, the following documents must be submitted:

- City Wage Tax Exemption Summary Sheet
- A printout of ISIS screen SQS3 or some other form from ISIS that indicates the course number, campus and instructor's name. Please highlight each course to be exempted. Summary sheets received without the ISIS form will not be processed and returned to the department.
- Temple University City Wage Tax Refund Application Form:
This form must be completed and signed by the faculty member and chairperson.

If a faculty member is requesting 100% exemption from city wage tax and is teaching less than 12 credit hours, then the faculty member must document where the non-teaching activity workload is being performed. The Department Chair or Program Director must certify this documentation. The City of Philadelphia does not recognize working at home as work performed outside of the City as long as the faculty member has an office in the City.

Any request submitted after the above-mentioned deadline or without the appropriate documentation will not be honored.

ALL DOCUMENTS MUST BE SUBMITTED TO MY OFFICE NO LATER THAN FRIDAY, APRIL 29, 2011.

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COLLEGE OF LIBERAL ARTS
CITY WAGE TAX EXEMPTION SUMMARY

DEPARTMENT: _____

SEMESTER: _____

CENTER NO: _____

NAME _____
Part-Time
Full-Time

TOTAL # CREDIT
HRS TAUGHT AT
AMBLER/TYLER

TUID#

CURRENT ADDRESS

*FRACTION OF CWT
NOT WITHHELD

AUTHORIZING SIGNATURE:

DEPARTMENT CHAIR/PROGRAM DIRECTOR

KEVIN M. GLASS, ASSISTANT DEAN

*NOTE:

The basis for calculating the appropriate amount of earnings not subject to city wage tax is 12 credit hours.
for full-time faculty and Presidential appointments

**TEMPLE UNIVERSITY
CITY WAGE TAX REFUND APPLICATION FORM**

ORGANIZATION: 800-Temple University

TUId : _____

EMPLOYEE NAME: _____
(Please Print)

DEPARTMENT NAME: _____

I hereby certify to the following:

1. That I am not a resident of the City of Philadelphia
2. That I did not work in Philadelphia during the time indicated below.
3. That Philadelphia wage taxes were withheld from my pay for the period indicated below.
4. The time indicated below does not include vacation, holiday and sick time.

Dates worked outside of the City of Philadelphia:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Number of Days: _____

Note: Please submit refund requests by month. All requests for refunds must be accompanied by supporting documentation.

Employee Signature

Date

Authorized (Printed Name and Signature)

Date