**Bonus or Incentive Form**

To request a Bonus or Incentive payment for any employee, please complete this form and return to Human Resources. All Bonus and Incentive payments will require Managing Partner approval. Additional documentation may be requested at the discretion of CORE, LLC. If you have any questions or concerns, please contact the Human Resources department at 225-456-2243.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Employee Information | | | | | | | |
| Employee Name | |  | | | | | |
| Employees Job Title | |  | | | | | |
| Employee Status (FT/PT) | |  | | | | | |
| Department/Division | |  | | | | | |
| Manager Requesting Change | |  | | | | | |
| **CHANGE REASON** | | | | | | | |
| Bonus (Discretionary, Non-Taxable) | |  | Incentive Payment (Non-Discretionary, Taxable) | | | |  |
| **Payment Details** | | | | | | | |
| ***Bonus or Incentive can be paid as a fixed amount of a % of Salary or a Specified Amount per Contract*** | | | | | | | |
| Current Pay Rate |  | | | Current Annual | |  | |
| Fixed Amount |  | | | | | | |
| % of Salary or Revenue |  | | | Figure % is Based on | |  | |
| # of Payments |  | | | | | | |
| Requested Effective Date (should be the beginning of a pay period) | | | | |  | | |
| Please explain the reason for the requested change below: | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
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If you have any questions or concerns, please contact the Human Resources department at 225-456-2243.

**Approvals**

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**Supervisor Date** **Human Resources Date**

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**Partners Approval Date**