STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene
201 W. Preston Street • Baltimore, Maryland 21201
Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary

REQUEST FOR PAYMENT OF BILINGUAL PAY

DHMH Timekeeping Manual

Unless bilingual skill is in the classification specification, an appointing authority may not require an employee to use bilingual skills to serve as a translator unless the employee is paid minimum bilingual bonus of $25.00 per pay period.

Name: _____

Social Security #: _____

Classification: _____

Agency Code (6 digits): _____

I certify that I have utilized bilingual skills for the pay period of _____ in the performance of my job duties and at the request of my supervisor. These skills are not defined in my classification specification as a job requirement.

_____	_____	_____
Employee Name (printed)	Employee Signature	Date

SUPERVISOR'S AUTHORIZATION TO PAY BILINGUAL PAY

I certify that this employee, at my request, has utilized bilingual skills in the performance of job duties during the month specified above. These skills are not defined by the employee's classification specification as a job requirement.

_____	_____	_____
Supervisor Name (printed)	Supervisor Signature	Date

Please submit your completed bilingual pay request form to:
Department of Health and Mental Hygiene
Office of Human Resources - Timekeeping Unit
201 W. Preston Street, 1st Floor
Baltimore, MD 21201