

In-Range Salary Progression Request

Department:	Division:
Employee's Name:	Bargaining Unit:
Classification:	Position Number:

Justification for In-Range Salary Progression:

Note: This form is to be completed for all in-range salary progression requests. Please refer to your respective *Collective Bargaining Agreement (CBA)* for the criteria definitions. *The justification must be related to one or more of the criteria listed in the CBA.* Attach a current job description and any supplements as needed. Supervisor's comments may be attached or verbally transmitted to the classifier.

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Review requested by: (Please check one of the following)

<input type="checkbox"/> Management	<input type="checkbox"/> Human Resources:
<input type="checkbox"/> Employee	<input type="checkbox"/> Employee's Signature:

Route this request to those whose positions are checked:

<input checked="" type="checkbox"/> Name and Title:	Date	Remarks/Comments:
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This is to certify that, if this request is approved, I have identified a permanent funding source for the increase

	Immediate Supervisor		
	Department Chair/Head		
	College Dean		
	Vice President		
	Provost		
	Human Resources		