

THE COLLEGE PROMOTION/SALARY ACTION REQUEST

Check all that apply:		SALARY/HOURLY RATE CH	ANGE 🗌 FTE CHANGE		
The College of Liberal Arts	and Sciences Departmen	t:	Dept Code:		
Employee Name:		E	impl ID:		
Effective Date:					
(Attach copy of resu	me and current/propo	sed functional list of job d	uties)		
CURRENT POSITION			PROPOSED ACTION		
JOB TITLE:		JOB TITLE:			
EMPL TYPE:		EMPL TYPE:			
EMPL RECORD:	JOB CODE:	EMPL RECORD:	JOB CODE:		
POSITION #		POSITION #			
CURRENT SALARY:		NEW SALARY:	% INCREASE	%	
CURRENT FTE:		NEW FTE:			
Cost Center/Program		% <u> </u>		%	
Cost Center/Program		Cost Center/Program		%	
Cost Center/Program		<u>%</u> Cost Center/Program		%	

JUSTIFICATION FOR CHANGE:

Contact Name (PLEASE PRINT)	Phone/Fax	
Department Chair/Director Name	Signature	Date
The College Divisional Director Name	Signature	Date
The College Dean Name	Signature	Date

***When approved, form will be returned to the unit. Please process updates/changes in PeopleSoft via a PTR and Position Management.