

Troy University Salary Increase or Promotion Requisition

Complete this form to request approval to increase an employee's salary, promote employee with increase, or assign additional duties with increase.

Title of Position: _____ **PeopleAdmin Position ID:** _____

Employee Name: _____ **Proposed New Title (if applicable):** _____

Current Salary: _____ **Proposed New Salary:** _____

FY _____ **Budget Amount:** _____ **Effective Date:** _____

FY _____ **Budget Amount:** _____ *Note: If you do not know the budgeted amounts for your position, please review the position description in PeopleAdmin first, then call HR if you have any questions.*

How position will be funded:

___ Existing budgeted funds for position

___ Transfer funds from a vacant position. *PeopleAdmin Position ID:* _____

___ Transfer funds from another department GL account. *Account number:* _____

___ Other - Please explain:

Justification for salary increase:

This must include a statement of critical need, and if applicable, costs savings generated from this action.

Director/Dean/AVC: _____ Date _____

Senior Vice Chancellor of Division: _____ Date _____

Senior Vice Chancellor of Finance: _____ Date _____

Chancellor: _____ Date _____

Comments from Approvers: