



<b>Reset Form</b>					
Banner ID # :	Emplo	yee Name:		Position #:	
PROPOSED WORKING	•		SALARY/HOURLY RATE	LAST INCREASE WHE	EN/WHY?
Verification of performance from the supervisor:  This employee IS NOT currently on a PIP, & has satisfactory (meets expectations) on last performance review  This employee IS on a PIP or had a did not meet on the last performance review					
What do you think is the current market rate for this role? Please cite your source(s).					
Why is this action being requested? Provide a general justification statement: Refer to Classification/Compensation guide for information.					
Relevant training, certification, license, etc.: List specialized courses of instruction, certification, licensure recently acquired by the employee. How do they apply to the current job assignment?					
Relevant work expe	erience: Summarize em	ployee's work expe	rience and current cred	dentials that support	the request.
Are there comparable positions that perform the same type of work that would assist in classifying this position? If so, please provide position details, position number, dept., etc. If not, why is this position unique to your department?					
Is the scope outside of your department? Identify and provide explanation.					
Statewide:					
University: School/Division:					
List the number of	employees, by type of	position, that the er			Exempt -
None	Students	Hourly	Non-Exempt Operational/Clas	ssified	Operational/ Professional