

IOWA STATE UNIVERSITY

FY2018 Annual Salary Adjustment Request Form

Purpose Departments use this form to provide rationale for any annual total salary adjustments (effective July 1, 2017) pursuant to the Annual Salary Adjustment Parameters. A total salary adjustment is defined as increases in base pay attributed to the sum of performance, market, and/or equity.

Employee Name _____ Job Classification (Title/Rank for Faculty) _____

University ID# _____ Department Name _____

Salary Base (A,B,D,P) _____ Supervisor Name _____

Amount of Total Salary Adjustment Requested

Current Rate of Pay	FY18 Requested Rate of Pay	Percentage Change for (check all that apply)	
\$ _____	\$ _____	Performance	% _____
		Market	% _____
		Equity	% _____

Salary Adjustment Rationale (Provide sufficient detail to explain the adjustment and break it down into its component parts. For market or equity adjustments, external and/or internal compensation data is necessary to show the disparity. Specific examples of how the performance was extraordinary should be included.)

Requestor and Department Approvals ISU does not discriminate on the basis of race, color, age, religion, sex, sexual orientation, gender identity, genetic information, national origin, marital status, disability, or protected veteran status. I certify that this request is consistent with ISU policies, UHR/EO guidelines and must meet Fair Labor Standards Act, Equal Pay Act, Title VII of the Civil Rights Act of 1964, and all other employment laws and regulations.

Signatures

Department Chair/Head _____ Date _____

Dean/Director _____ Date _____

CFO/SVP/SVPP/President _____ Date _____

Forward form to respective SVP or President for approval and retention