

**CHARLESTON SOUTHERN UNIVERSITY
PAY INCREASE REQUEST**

Position: _____ Name: _____ SSN: _____

Department: _____ Contact Name: _____

Contact E-Mail: _____ Phone Number: _____

I. Base pay increase request: (attach justification)

- Y Increased responsibilities(attach revised position description)
- Y Market conditions including counter-offers and retention due to specialized training
- Y Increase to resolve a pay disparity considering education, experience or duties and responsibilities of other employees.
- Y Approved career development programs.
- Y Sustained superior performance.

II. One-time pay request: (attach justification)

- Y This lump sum is discretionary and No overtime was earned or paid to the employee for the pay period during which this work occurred. The dates were:
Beginning: _____ **Ending:** _____

Type of lump sum proposed:

- Y Special project or assignment which is in addition to the employee's regularly assigned duties.
- Y Documented significant increase in productivity or productivity goal achievement.

Position Information

Pay Band: _____ Pay Step: _____ Position Control #: _____

Supervisor: _____ Monthly/Biweekly: _____ Phone Number: _____

Pay Data

Current Annual Rate: _____ Proposed Annual Rate: _____

Current BW/Monthly Rate: _____ Proposed BW/Monthly Rate: _____

% Increase/Decrease: _____ Lump Sum Payment: _____

ATTENTION:

Supervisory and administrative signatures indicate support of the proposed action and that sufficient funds/rates are available.

REQUIRED SIGNATURES:

Employee: _____ Date: _____

Supervisor: _____ Date: _____

Director or Dean: _____ Date: _____

Senior Officer: _____ Date: _____

VP for Business Affairs: _____ Date: _____

President: _____ Date: _____

For Completion by Human Resources Upon Final Action

Received By: _____ Date: _____

Pay Raise Effective Date: _____