**SALARY EXCEPTION REVIEW FORM**

**Effective Date:** 2/7/19

**Information about the Employee, their Current Salary, and the Proposed Salary Change:**

<table>
<thead>
<tr>
<th>Empl ID#</th>
<th>Univ Service Date</th>
<th>Yrs of Srvc</th>
<th>Position Date</th>
<th>Yrs in Pos</th>
<th>Curr Grade</th>
<th>Current Salary</th>
<th>New Salary</th>
<th>New Grade</th>
<th>$ Change</th>
<th>% Change</th>
</tr>
</thead>
</table>

On the line below, in unshaded cells only, enter all Current Employee Information, and the Proposed Salary (information in shaded cells will automatically be generated).

**OTHER REQUIRED INFORMATION:**

Detail salary increases, or additional compensation the employee has received in the past 12 months:

(If exception is for 7/1 salary, include any 7/1 salary increase or additional compensation paid in the last 12 months)

For salary increases, provide the salary range (lowest and highest salaries) and average salary for: (1) all other staff in the same position; and (2) all staff in the same grade:

Provide a "Business Rationale" to explain the exceptional salary increase:

**Departmental Signatures:**

Dept Administrator/Top Dept HR Manager Signature: [Signature] Date: / /

For salary increases and promotional increases per grade that equal or exceed 20% of current salary:

School Dean or Top Dept Administrator Signature: [Signature] Date: / /

**CUHR Approval:**

CUHR Client Manager: [Signature] Date: / /

CUHR Compensation (if applicable): [Signature] Date: / /