

SALARY INCREASE DENIAL NOTIFICATION

(Attach to the Salary Review Report and return to Central Human Resources Department)

PR #

Employee's Name			EMPLOYEE NUMBER
JOB TITLE		JOB CODE	
CURRENT SALARY	CURRENT STEP (IF APPLICABLE)	SCHEDULED INCREASE DATE	
DEPARTMENT NAME		DEPT ID	PROPOSED NEW SCHEDULED INCREASE DATE

I am requesting that the scheduled salary increase for the above individual be denied for the following reason(s):

DEPARTMENT HEAD OR DESIGNEE

I have been advised of this action and acknowledge the reason(s) for a denied salary increase as stated above.

EMPLOYEE'S SIGNATURE

HR SIGNATURE

DATE

HR-SID May 2019

HR PROCESSOR DATE & PAY PERIOD

DATE

DATE