Faculty Salary Increase Request

This form is to be used for requesting salary increases for represented full-time faculty, as described in CBA Article 18.6. The Article’s provisions do *not* apply to academic administrators, non-represented and/or part-time faculty.

Faculty Member’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rank: \_\_\_\_\_\_\_\_\_\_\_\_\_

College/School/Unit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dept.: \_\_\_\_\_\_\_\_\_\_\_\_\_

Proposed action (per Article 18.6): Check one box.

\_\_\_\_\_Competitive offer from another Institution

Faculty member’s current FY salary: \_\_\_\_\_\_\_\_\_\_\_   
FTE\_\_\_\_\_\_\_ Term length\_\_\_\_\_\_

Proposed Increase amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Revised salary: \_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_Adjusting for anomalously low salary

Faculty member’s current FY salary: \_\_\_\_\_\_\_\_\_\_\_   
FTE\_\_\_\_\_\_\_ Term length\_\_\_\_\_\_

Proposed Increase amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Revised salary: \_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_One-time, non-continuing salary money for outstanding professional contributions

Proposed One-Time award: \_\_\_\_\_\_\_\_\_

Area(s) of Outstanding Contribution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Effective Date of Base Increase or One-Time Award: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean Signature Date

Provost Signature Date

Please route to:

Jim O. Vigoreaux, Vice Provost for Faculty Affairs