

CHRISTOPHER NEWPORT UNIVERSITY
Pay Action Worksheet & Request Form

I. Initiating the Request

A. Department/Office Information			
Department/Office	_____		
Requestor	_____		
Office Telephone #	Fax	E-mail	
_____	_____	_____	_____
Requestor Signature			Date
_____			_____

B. Employee Information for Pay Action			
Employee Name	_____		
	Last Name	First Name	Middle Initial
Working Title	_____		
Role Title	_____		
Band #	Current Salary		
_____	_____	_____	

II. Pay Action Requested (check one)

A. In Band Adjustment

B. Role Change

C. Voluntary Transfer (Non-competitive - no job search)

Note: For a competitive voluntary transfer, a job search was conducted, use the AP15-C, not this form.

- D. Voluntary Demotion Transfer
- E. Temporary Pay
- F. Competitive Salary Offer
- G. In-band Bonus

III. Pay Action Justification

- A. Document and attach appropriate pay factors to demonstrate the need for the pay action. Use all pay factors that apply to your request. You must include internal alignment.
- B. Definitions of the Pay Factors are included on the attached sheet.

IV. Cost of Pay Action and Funding Source

A. Projected Cost

- 1. Pay action requested _____ (See Section II)
- 2. Effective date of proposed salary action _____
- 3. Recommended % _____ and dollar amount _____
(See Pay Action Chart for minimum & maximum %.) or amount of in-band bonus
_____ (If an in-band bonus, skip to IV.A.5.c.)
- 4. Resulting base salary (annualized) _____
- 5. Cost for remaining fiscal year (fiscal year is from July 1 to June 30)
 - a. Salary _____ (# of remaining pays x semi-monthly salary)
 - b. Benefits _____ (# of remaining pays x semi-monthly salary x 25%)
 - c. Total cost for remaining fiscal year _____ (a + b) or amount of in-band bonus (skip to IV.A.6 if in-band bonus will occur in the next fiscal year.)
- 6. Total cost for next fiscal year _____ [annual salary + (annual salary x 25%)] or if the in-band bonus will occur in the next fiscal year.

B. Funding Source

- 1. Pay Action Requestor's Budget
 - a. Budget Account #: _____
 - b. Budget Manager _____
 - c. To take from budget object code _____ and transfer to code _____

2. Supervisors Budget

- a. Budget Account #: _____
- b. Budget Manager _____
- c. To take from budget object code _____ and transfer to code _____

3. If funded this year, and not a bonus, how will the salary action be funded next year?

4. Budget request for the next fiscal year

- a. Pay action requestor submit request to supervisor for consideration in the next fiscal year. Request for funding consideration for the next fiscal year does not imply approval.

V. Pay Action Approval for Classified Employees

Signatures required on the Pay Action Form for classified employees reporting to academic areas: Department Chair, Dean, Provost, Planning & Budget, Human Resources

Signatures required on the Pay Action Form for classified employees reporting to administrative areas (nonacademic): Director/Associate VP (as appropriate), Dean of Students/VP(as appropriate), Planning & Budget, Human Resources

VI. Review & Approval Signatures (Note: Proposed salary action cannot take effect until all appropriate approval reviews and signatures are obtained.)

Department Chairman/Director/ Date
Associate Vice President/Associate Dean

Dean (if appropriate) Date

Vice President Date

Provost (if academic area) Date
Chief of Staff (for appropriate areas)

Director of Planning and Budget Date

Associate VP, Human Resources Date