



REQUEST FOR APPROVAL OF STUDENT WAGE RATE INCREASE

Date: \_\_\_\_\_

Department Head: \_\_\_\_\_

Department/Project Name: \_\_\_\_\_ Project Number: \_\_\_\_\_

Position Supervisor: \_\_\_\_\_ Position Title: \_\_\_\_\_

Employee Name: \_\_\_\_\_
Last First MI

IF NEW HIRE — request to hire above minimum wage:

Requested hourly rate: \$ \_\_\_\_\_ Number of hours per pay period: \_\_\_\_\_

\*Attach this request when submitting the Conditions of Hourly/Wage Employment Form.

IF CURRENTLY EMPLOYED — request for increase:

Current hourly rate: \$ \_\_\_\_\_ Number of hours per pay period: \_\_\_\_\_

Requested hourly rate: \$ \_\_\_\_\_ Date increase to be effective: \_\_\_\_\_

JUSTIFICATION FOR INCREASE — briefly explain reason for request:

Five horizontal lines for justification text.

REQUIRED APPROVING SIGNATURES:

EMPLOYEE SUPERVISOR \_\_\_\_\_ DATE \_\_\_\_\_
DEPARTMENT HEAD \_\_\_\_\_ DATE \_\_\_\_\_
VICE CHANCELLOR \_\_\_\_\_ DATE \_\_\_\_\_
HUMAN RESOURCES \_\_\_\_\_ DATE \_\_\_\_\_
BUDGET OFFICE \_\_\_\_\_ DATE \_\_\_\_\_