

## Pay Adjustment Request

**Instructions:** Complete the following sections for pay increase requests other than salary policy or above those governed by ARSD 55:10:11. For multiple requests with same adjustments and justifications, list all employees (box will expand with list) or provide information below in an excel spreadsheet. For assistance, please contact the Human Resource Manager.

<b>Employee name:</b>		<b>Date of request:</b>	
<b>Agency:</b>		<b>Human Resource Manager:</b>	
<b>Employee ID:</b>		<b>Supervisor:</b>	
<b>Classification:</b>		<b>Pay grade:</b>	
<b>Working title (when applicable):</b>			
<b>Current pay rate:</b>	<b>Proposed pay rate:</b>	<b>Total Increase (\$):</b>	
<b>Current compa-ratio*:</b>	<b>Proposed compa-ratio:</b>	<b>Total Increase (%):</b>	
<b>Effective date (begin date):</b>		<b>End date (when applicable):</b>	

\*compa-ratio = (base pay rate / market value) x 100.0%

### Type of Increase

Check the box that is most appropriate.

<input type="checkbox"/>	<b>Equity</b>	to a level comparable with current employees
<input type="checkbox"/>	<b>Market</b>	towards the market value of pay grade, not above
<input type="checkbox"/>	<b>Retention</b>	countering an employment offer from another employer
<input type="checkbox"/>	<b>Education/Certification</b>	acquisition of job-related skills or knowledge
<input type="checkbox"/>	<b>Geographic</b>	differing labor supply or demand within local area
<input type="checkbox"/>	<b>Temporary Additional Duties</b>	additional responsibilities with known and stated end date
<input type="checkbox"/>	<b>Permanent Additional Duties</b>	additional responsibilities with no end date
<input type="checkbox"/>	<b>Reclassification/Pay Grade change</b>	change of classification/pay grade
<input type="checkbox"/>	<b>Other</b>	please describe in justification

**Justification:** In the space below, please provide reasoning for proposed salary increase. (More space available on next page.)

# Pay Adjustment Request

**Justification** (continued)

	<b>Approved</b>
	<b>Not Approved</b>
	<b>Approved with changes below</b>

**Signatures**

<i>Supervisor</i>	Date
<i>Division Director</i>	Date
<i>Department Secretary/Bureau Commissioner</i>	Date
<i>Human Resource Manager</i>	Date
<i>Director of Classification and Compensation</i>	Date
<i>Commissioner of Bureau of Human Resources</i> <small>(required if total increase is above 10% of original pay rate)</small>	Date