

IN-RANGE PROGRESSION REQUEST FORM

INSTRUCTIONS: Employee-initiated requests should be submitted to appropriate manager with a copy forwarded to HR for review. Manager-initiated requests should be signed by appropriate administrators and forwarded to HR for review. For MPP's, use the MPP Action Form.

EMPLOYEE INFORMATION	J				
Employee Name		Classification	Classification		
Unit/Department		Division	Division		
CSUEU (Units 2, 5, 7, 9)	APC (Unit 4)	Teamsters (Unit 6)	SUPA (Unit 8)	Confidential	
Requested By		Requestor Name Date Requested			
Employee	Manager				
			•		
JUSTIFICATION FOR REQU	JEST *Attach additional ir	nformation, as needed			
			Y /		
		•			
AMOUNT REQUESTED					
	etod.	Y			
Percentage/Amount Reques					
FUNDING CONFIRMATION	I: Funding for approved re	quests must come from the empl	loyee's primary department		
Funding Source:					
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APPROVED FOR REVIEW Dean/Director/Administrator		Date	Comments		
Dean/Director/Administrator		Date	Comments		
PAT Reviewer (optional)		Date	Comments		
2ndPAT Reviewer (optional)		Date	Comments		
Zildi Al Reviewei (optional)					
PAT Member		Date	Comments		
RECEIVED BY HUMAN RES	SOURCES		<u> </u>		
HR Analyst			Date		
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