Office of Chief Adminstrative Officer Request For Employee Salary Approval

OCAO Staff Office							
Position							
Title/Series/Payband:							
Funding Source:							
	Full Time		Part Time		Promotion		New Position
Name of proposed hire:							
Current job/location/position:							
Current Salary Compensation: \$							
Salary Bonus/Relocation Cost \$ (justification required)							
Recommended Salary Determination \$ (justification required)							
Justification (proof of current salary attached):							
Supervisor Signature						Date	
Division/Office Director Signature						Date	
CAO/Bu	dget Office Signa	ture				Date	
					\$		
Pay Pool Manager Approval				Approved Salary \$	Date		

Return approved form to Judy Mickens for appropriate action.

Copy to: CAO Budget Supervisor