



**SALARY MERIT ADDENDUM**

|                       |   |
|-----------------------|---|
| Empl. Name:           | Empl. ID #:                                       |
| Department and OPR #: | Job Title:  |
| Supervisor Name:      | <b>Evaluation Period</b><br>From: _____ To: _____ |

**We have reviewed the job description and:**

|   |  |
|---|--|
| <input type="checkbox"/> No changes to job description (i.e. current job description is accurate) | <input type="checkbox"/> Changes to job description are necessary. If checked, revised job description must be sent to the management center HR office within one month. |
|---|--|

|                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <b>Exceptional</b>       | Consistently exceeded expectations  |
| <input type="checkbox"/> | <b>Highly Effective</b>  | Often exceeded expectations   |
| <input type="checkbox"/> | <b>Successful</b>        | Generally met, though occasionally may have exceeded or failed to meet, expectations  |
| <input type="checkbox"/> | <b>Needs Improvement</b> | Did not generally meet, though occasionally may have met, expectations                |
| <input type="checkbox"/> | <b>Unsatisfactory</b>    | Usually below or failed to meet expectations. - <i>A PCA is required - contact HR</i> |

|                                       |                                  |                       |
|---------------------------------------|----------------------------------|-----------------------|
| <b>Current Salary</b><br>\$           | <b>Salary Grade</b>              | <b>Quartile</b>       |
| <b>Proposed Raise Percentage</b><br>% | <b>Proposed New Salary</b><br>\$ | <b>Effective Date</b> |

**Employee is aware that the proposed raise is not final and may be revised by the department's Management Center or the university based on budget or policy.**

\_\_\_\_\_  
Employee Signature Date  
*Signature is an expectation; acknowledges receipt only*

\_\_\_\_\_  
Supervisor Signature Date

\_\_\_\_\_  
Approval Signature Date

\_\_\_\_\_  
Management Center Signature Date

The Salary Merit Addendum is part of the Annual Review. **The entire Annual Review - Performance Evaluation and Salary Merit Addendum (and Self-Assessment if applicable) - must be forwarded to the HR Records Office for processing before any compensation changes can be entered.**

\_\_\_\_\_  
Human Resources Department Review Date