



# WHITMAN COLLEGE

## TEMPORARY SALARY ADJUSTMENT FORM

Interim Title Change (if applicable): \_\_\_\_\_

Employee Name: \_\_\_\_\_ Employee WID: \_\_\_\_\_

Salary Adjustment Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Note: End date is required even if the interim increase is due to a vacant position. Please add a requested end date, with the option to reevaluate at that time as needed.

Salary Adjustment: \_\_\_\_\_ % Temporary Salary: \_\_\_\_\_

GL(s) to use for Temporary Increase: \_\_\_\_\_

Vacant Position Title (if applicable): \_\_\_\_\_

**Rationale:** (i.e., Interim or Acting Role, Significant Higher-Level Work Duties, Leading Higher-Level Special Projects)

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Supervisor's Name:

Printed: \_\_\_\_\_

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