HUMAN RESOURCES IN-RANGE PROGRESSION (IRP) REQUEST FORM

Employee

Request submitted by:

Employee Name:

Department Name:



Please use this form to request an In-Range Progression. Forward the signed completed form to Human Resources. Specific information on the conditions governing in-range progression requests is available within the Collective Bargaining Agreements. Short concise responses appropriate. If you need to attach additional pages please do so.

Supervisor/Manager:

Employee ID:

Department ID:

Job Code: (Classification) Grade Level:			Classification Name:						
Position	n Number:		Working Title:						
BARGAI	NING UNIT: Uni	it 1 CSUEU (2,5,7,9)	Unit 4	Unit 6	Unit 8	C99 (Confidential)			
PLEASE SELECT THE BASIS FOR THE REQUEST AND PROVIDE SUPPORTING INFORMATION BELOW									
	Significant Increase in Responsibilities (Includes ongoing "Lead" or project coordination.) Must be ongoing, essential to the job, and consistent with the current classification. Please attach your current position description. (If increased responsibilities are not consistent with the current classification, you may submit a request for a classification review.)								
	your current	tional responsibilities not position (include percentaning these duties).							
		onsibilities within your coription that are no longer							

Employee Performance					
Describe how performance warrants an in-range progression. (May include ratings or comments from performance evaluations, commendations, etc.) describe how performance warrants an in-range progression. (May include ratings or comments from performance evaluations, commendations, etc.)					
Equity Internal equity (within department/division/university) or External (market) equity.					
Requesting employee or department should provide salary data used as a basis for the request.					
Explain the reasons that support the request for an equity review.					
New or Enhanced Skills Must be substantive in nature, essential to the job, and consistent with the current classification. Please attach your current position description. (If new or enhanced skills are not consistent with the current classification,					
Describe the substantive new or enhanced skills and how they are critical in carrying out the requirements of the position.					

	Retention									
	•	Describe how continued employment of this individual is critical to the ongoing operations of the campus. Specify how qualified candidates such as this individual are in short supply in the labor market. Or, provide another mission-based reason for a retention increase.								
	Other Salary Related Criteria									
	Specify any salary related criteria that does not fall within any criteria specified above that supports a pay increase.									
Signatures										
Print Employee Name:			Eı	Employee Signature:			Da	ite:	Ext.	
Print Supervisor Name:			Sı	Supervisor Signature:			Da	ite:	Ext.	
Print Division Vice President Name:			D	Division Vice President Signature:				ite:	Ext.	
Huma	n Res	sources Recomm	endations ((**F	or HR Us	se Oı	nly**)			
Commo	Comments:									
Request		Effective Date:	Current Base: (Minimum 3% increase requi	ó	Funding	J.	System-wide Campus (Dep	artme	nt)	
Request not supported										
Print Name of Human Resources Manager			Signature:				Date:			