

Recommended Action Form

Promotions and Non-Redelegated Merits

(Print on Blue Paper)

Effective Date: _____

Recommended Action

Merit Increase	9 Mo.	11 Mo.	Normal	Accel. (Years)	Decel. (Years)
Promotion	9 Mo.	11 Mo.	Normal	Accel. (Years)	Decel. (Years)

Years at Rank: _____ Years at Step: _____

Name: _____

Department: _____

% of Time: _____

Department: _____

% of Time: _____

Department: _____

% of Time: _____

Department: _____

% of Time: _____

Department: _____

% of Time: _____

Present Status

Rank & Step	% of Time	Title Code	Monthly Salary	Annual Salary
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Proposed Status

Rank & Step	% of Time	Title Code	Monthly Salary	Annual Salary
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____