

Official Notice of Salary Increase Form

Employee Name:

Employee ID/Number:

Job Title:

Department:

Current Salary:

e.g. \$50,000/year

New Salary:

e.g. \$55,000/year

Effective Date of Increase:

Reason for Salary Increase:

Describe the reason for the salary adjustment (e.g., exceptional performance, market adjustment, pro

Authorized By:

Date of Authorization:

Submit

This official notice documents the approval and justification for your salary increase.
Please retain a copy for your records.