

RECOMMENDATION FOR MARKET ADJUSTMENT

Name (last, first, initial) SSN/Sam ID Present Rank Department/School or Program

Academic degrees, institution granting, and year received: _____

Tenure Status: Tenured _____ (year) _____ Probationary _____

Years in Present Rank: _____

Date of initial employment at SHSU: _____

Faculty Salary Survey by Discipline and Rank

Current Salary	SHSU Average Salary	National Average Salary	Source of National Salary Data: (Example) CUPA 2001-2002 Nat'I Faculty Salary Survey

Recommendation on Market Salary Adjustment:

_____ Yes, with salary increment adjustment of \$ _____ .
_____ No

Department/School Chair Date

Recommendation on Market Salary Adjustment:

_____ Yes, with salary increment adjustment of \$ _____ .
_____ No

Academic Dean/Director Date

Recommendation on Market Salary Adjustment:

_____ Yes, with salary increment adjustment of \$ _____ .
_____ No

Provost/Vice President for Academic Affairs Date

This form is to be supported by materials which may be offered in support of the market adjustment.