S A M P L E

Request for Permanent Pay Plan Change

(Memo Request from the Dean/AVP)

Date: [**Current Date**]

To: [**Provost’s Name**], Provost and Vice President for Academic Affairs

From: [**Dean’s/AVP’s Name and Title**]

RE: Request for [**Permanent/Temporary**] Pay Plan Change

[**Provide a brief paragraph to outline the details/justification for the permanent pay plan change**] and include the following information:

* Employee’s name
* Classification title
* Department/college/division
* Bronco ID number
* Pay plan requested (10/12, 11/12, or 12/12)
* Proposed/requested month(s) off
* Effective date for the pay plan to begin (must coincide with the beginning of the pay period, see the Pay Period Calendar)
* Designation that the pay plan change is to be permanent or temporary
	+ If temporary, include length of time.
* Collective Bargaining Unit Number

Thank you.

Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Sylvia A. Alva, Provost and

 Vice President for Academic Affairs