



UNIVERSITY OF NORTH CAROLINA WILMINGTON

CAREER-BANDING SALARY DECISION WORKSHEET

Please complete this worksheet to document salary recommendations for SPA Career-Banded employees and attach the Career-Banding Competency Assessment Form. (For all pay actions, please contact HR Classification and Compensation for assistance and approval in making salary decisions prior to submitting funding request documents and/or the HR3.30 Position Action Request.)

New Hire/Employee Name: _____

Position Number: _____ Division/Department: _____

Banded Class (current): _____ Comp Level (current): _____

Advertised Salary Range (if applicable): _____

I. PAY ACTION: (Check applicable pay action)

___ Employment Action: (Complete People Admin process & attach CB Competency Assessment Form)

___ New Hire ___ Promotion ___ Reassignment/Transfer ___ Demotion

___ Employee Career Progression Salary Adjustment: (Choose One)

___ Skills Change (Attach CB Competency Assessment Form)

___ Competency Level Change (Employee Level only; Attach CB Comp Assessment Form)

___ Job Duties (Position & Employee; People Admin Re-Study & CB Comp Assessment Form)

___ Labor Market (Document below)

___ Retention (Requires prior approval from State level)

II. JUSTIFICATION: (Explain rationale for New Hire/Employee salary and/or competency change; Document review of Pay Factors: Availability of funds; Position Business Need and Employee Competencies; Internal Equity/Pay Alignment and Market Rates set by the Office of State Personnel.)

III. RECOMMENDATION: (Salary should reflect the individual's current salary if a State employee.)

Table with 6 columns: New Comp Level, Market Rate, Current Salary, Proposed Salary, % Change, Effective Date

IV. CERTIFICATION: I have used the Pay Factors in making this salary recommendation:

Supervisor's signature: _____ Date: _____

Director / Manager's signature: _____ Date: _____

Division VC's signature: _____ Date: _____

Human Resources Approval: _____ Date: _____