

CLASSIFIED SALARY PLACEMENT ADJUSTMENT REQUEST FOR HARD TO FILL POSITIONS

Credit allowances will be determined by the Administrator of Human Resources. This form is a **REQUEST ONLY**. Assurances or promises of salary adjustment(s) should never be given to an applicant until **after** this form is approved.

Position:	Location:
	To Be Completed by Principal/Program Director
	ved for a higher salary. Candidates will be placed on step one (1) until the years ified and this request has been approved.
Date Position Posted:	Date Position Closed (if applicable):
# of Qualified Candidates:	# of Candidates Interviewed:
Describe the candidate's related ex	perience and education:
Explain the reason for this adjusted	salary placement request:
Salary Step Recommendation Principal/Director Signature:	Step: (For consideration ONLY) Date:
Program Director Signature:_	Date:
Cabinet Level Signature:	Date:
 Position advertised multiple times Unique license required Other (i.e. District needs causing a 	(Check all that apply) nt year few or limited qualified candidates unique high demand area) DENIED
HR Administrator Signature:	Date:
Principal/Director Contacted: Date:	