

**Tufts University Human Resources Department**  
***Request for Compensation Review or Lump Sum Payment***

**Incumbent Name:**

**Current Salary:**

**Current Job Title:**

**Division: Department:** *Briefly summarize the rationale for this request (2-3 paragraphs). Areas to highlight may include significant changes to the position's duties, identified internal equity, or market issue. For a lump sum, describe specific event, project or accomplishment:*

**Date:**

**Manager Name:**

**Manager Title:**

**Signature:** \_\_\_\_\_

**Next Level Manager Name:**

**Next Level Manager Title:**

**EAD/VP Name:**

**Comments:**

Approval to submit for comp for evaluation: \_\_\_\_\_

**Date:**

**To be completed by Human Resources:**

**HR Compensation recommendation:**

**Salary:**

**Percent Increase:**

**Effective Date:**

**Title:**

**Lump Sum Amount (if applicable):**

**Comments:**

**Name/Signature:**

**Date:**

**To be completed by Executive Vice President:**

**Approve:**

**Deny:**

**Approve with modifications:**

**Comments:**

**Signature:** \_\_\_\_\_

**Date:**