



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

<b>Employee's Name:</b>	<b>Job Title:</b>
Current Salary:	Mgr's Name:

<b>Section I – to be completed by the Manager</b> <i>Briefly summarize the rationale for this request (1-2 paragraphs). Areas to highlight may include major changes to job duties, identified internal equity or market issue. (If the job has changed significantly, attach a completed Job Content Questionnaire.) For a lump sum payment, describe the specific event, project or accomplishment and note the amount requested.</i>

<b>Section II – to be completed by Requesting Department with approval from EAD/VP</b>					
Dept ID	Year 1 Current FY Salary Budget for Position	Proposed Cost for Position Salary	Diff \$ (if applicable)	FY 2 Budget for Position Salary	
<i>Please provide details on how your department will fund any pay adjustment or lump sum payment within the current labor budget and how any pay adjustment will be factored into future budgets. Note: Amounts that exceed \$2,500 must be approved by the Budget Center.</i>					
EAD/VP Signature:				Date:	
HR Business Partner Signature:				Date:	