



UUP SALARY INCREASE/PROMOTION APPEAL FORM

This form should be used when applying to the College Review Panel for a review of a denial of a salary increase and/or promotion in accordance with the appropriate provisions stated in Appendix A-28 in the Agreement between United University Professions (UUP) and the State of New York. Before applying to the Panel, a professional employee must first have requested a recommendation for a salary increase from the immediate supervisor and been denied at an organizational level below that of the President.

Instructions: UUP Employee should complete this form and submit to the UUP Office, 226A Hewitt Union, SUNY Oswego. Please contact the UUP office at 315-312-3263 or uup@oswego.edu with any questions.

- 1. Employee’s Name _____
- 2. Department _____
- 3. Employee’s Current Budget Title _____
- 4. Proposed Budget Title (if different) _____
- 5. Local Title (if different) _____
- 6. Proposed Local Title (if different) _____
- 7. Salary Level (SL) _____
- 8. Proposed Salary Level (SL) (if applicable) _____
- 9. Annual Salary _____

Please indicate the basis for your appeal:

- Denial of Promotion (i.e. change in budget title, salary grade level, and salary increase). “Promotion” for this purpose shall mean an increase in a professional employee’s basic annual salary with a change in title and movement to a higher salary rank, resulting from a permanent significant increase or change in the employee’s duties and responsibilities as a consequence of a permanent increase in the scope and complexity of function of the employee’s position.
- Denial of Salary Increase (without a change in budget title or salary grade level). “Salary Increase” for this purpose shall mean an employee who has been assigned a permanent and significant increase in duties and responsibilities as demonstrated by the employee’s performance program.

10. Supervisor’s Name and Title _____

11. Indicate the Salary and/or Title (if applicable) that you believe you should receive.

12. In order to be considered for a salary increase, you must demonstrate that you have been assigned a permanent and significant increase or change in duties and responsibilities.

Please Identify and describe the permanent and significant increase in duties, tasks and responsibilities reflected in the attached most recent performance program that you believe qualifies you for a salary increase. (Use extra paper if necessary)

In addition to completing this application, please attach the following supporting documents:

- Copies of your two most recent performance programs (should include one current performance program)
- An organizational list showing the chain of command applicable to your position

Employee Signature

Date