



Office of Research
Postdoctoral Affairs
UNIVERSITY OF GEORGIA

**Request for Salary Action for
Postdoctoral Research (& Teaching) Associates**

Instructions: Complete this form when requesting a salary increase for a postdoctoral research associate. Obtain signature approval from the department head or director (if applicable) and then the dean or vice president. Send this form to Office of Postdoctoral Affairs (Office of Research Suite, Coverdell Building).

Date of Request: _____

Postdoc Information:

Postdoc Research Associate Postdoc Research and Teaching Associate

Postdoc Name: _____ Unit: _____

Research Mentor: _____

Salary Increase Request:

Proposed Effective Date: _____

Previous FY Salary: _____ Current Annual Salary: _____ Proposed Annual Salary: _____

Proposed % Increase from current salary: _____ Cumulative FY % Increase: _____

Funding: Resident Instruction Restricted Auxiliary Other state (not grant)

Justification:

Approval by Department Head/Director and Dean/Vice President

By signing this document I agree with the above justification and affirm that adequate funding is available to support this salary request.

Dept Head/Director

Date

Dean/Vice President

Date

Approval by Office of Postdoctoral Affairs

For Research & Teaching Postdocs Only
Approval by SVPAA & Provost/Faculty Affairs

Director

Date

SVPAA & Provost/Faculty Affairs

Date

