

Compensation and Classification Request (CCR)

Request Information

Date _____ Department _____ Requested by _____

Contact Person _____ VP/Dean Signature _____

Current Employee _____ Position ID _____

New Position

Job Title _____ Proposed Salary _____ FTE _____

Reclassification

Promotion

Current Job Title _____ Current Salary _____

New Job Title _____ New Salary _____ New FTE _____

Salary Increase

Current Salary _____ New Salary _____

Temporary Position

Job Title _____ Hourly Rate _____

Start Date _____ End Date _____ FTE _____ < 4.5 months

Supplemental Pay

Job Title _____ Monthly Amount _____

Start Date _____ End Date _____

Increase Hours

Current Hours _____ New Hours _____

Other _____

Position Funding

1. Describe how the new position, increase, supplement, et cetera, will be funded. Include the funding percentage distribution for each cost center to be charged (e.g., 100% full funding from one cost center, split funded (list percentages 50% / 50%, 80% / 20%, et cetera.)

Cost Center _____ Project/Grant ID _____ Funding % _____ Funding End Date _____

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Cost Center _____ Project/Grant ID _____ Funding % _____ Funding End Date _____

2. Is funding from a vacated position? Yes No

▶ *If YES, provide the position number and cost center for the funding.*

Position # _____ Current Cost Center _____

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3. Is funding from Wages and/or Maintenance and Operations (M&O)? Yes No

▶ *If YES, provide the budgetary account the funding is coming from.*

Cost Center _____ Budgetary Account # _____ (A1200, A4000)

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Business Rationale for Position

Please briefly describe the business need and rationale to justify the request.

Instructions

Required Documents

In addition to the signed CCR form, please provide the documents listed below for each request type. All documents should be emailed to compensation@uta.edu.

- **Additional Pay/Supplement:** Current job description, documentation describing additional duties, VP/Dean Approval³
- **New Positions:** Proposed organizational chart¹, new job description, VP/Dean Approval³
- **Over Allocations:** VP/Dean Approval³
- **Promotions:** Current and proposed organizational chart¹, current and proposed job description², VP/Dean Approval³
- **Reclassification (populated position):** Current and proposed organizational chart¹, current and proposed job description, VP/Dean Approval³
- **Reclassification (vacant position):** Organizational chart¹, job description, VP/Dean Approval³
- **Salary Increase:** Job description², VP/Dean Approval³

¹Organizational charts should list employee names and official job titles.

²The type of salary increase dictates if a job description is needed. Email Compensation at compensation@uta.edu.

³VP/Dean Approval can be a signature on page 1 of this document or written approval in an email.

Approval Process

- The manager must obtain a signature from the VP/Dean on this form or written approval in an email.
- Email the CCR form, and all required documentation including the VP/Dean's approval to compensation@uta.edu.
- The CCR Committee will review all requests and approve or not approve the request.
- It is the department's responsibility to submit an eForm to process the request after receiving approval.

NOTE: The review and approval process will be delayed if the required documentation and VP/Dean approval are not provided when the request is submitted to Compensation.