

How To Complete A DocuSign Form For HR

1

Navigate to <https://powerforms.docuSign.net/05232abe-924c-4e1f-8ada-04d49ec76f18?env=na3&acct=0df82721-ac1d-4c63-a607-e443830d0cf0&accountId=0df82721-ac1d-4c63-a607-e443830d0cf0>

2

Add your full name and email here

Please enter your name and email to begin the signing process.

Prepared By

Your Name: *

Your Email: *

Please provide information for any other signers needed for this document.


Employee (for HR Tracking DO NOT change email)

Name: *

- 3 Enter the full name of the employee, *do not change* the email address

signers needed for this document.

Employee (for HR Tracking DO NOT change email)

Name: * 


Email: *

Supervisor
Name: *

Email: *

- 4 Enter the full name and email of the Supervisor **tab** to next field

Supervisor

Name: * 

Email: *

University Business Officer or Delegate
Name: *

Email: *

Additional Department Chair, Dean, Director.

- 5 Enter the full name and email of the UBO or Delegate **tab** to next field

University Business Officer or Delegate

Name: *

Email: *

Additional Department Chair, Dean, Director, or Delegate (Optional)

Name:

Email:

- 6 Enter the full name and email of the Department Chair/Dean, Director or Delegate **tab** to next field

Additional Department Chair, Dean, Director, or Delegate (Optional)

Name:

Email:

Dean/Director or Delegate

Name: *

Email: *

7

Enter the full name and email of the Dean/Director or Delegate **tab** to next field

Dean/Director or Delegate

Name: *

Full Name

Email: *

Email Address

Vice President or Delegate

Name: *

Full Name

Email: *

Email Address

Budget Office

8

Enter the full name and email of the VP or Delegate **tab** to next field

Vice President or Delegate

Name: *

Full Name

Email: *

Email Address

Budget Office

Name:

Budget Office

Email:

budget@isu.edu

Human Resources

9 Do not change anything here

Budget Office

Name:

Email:

Human Resources

Name:

Email:

10 Do not change anything here

Email:

Human Resources

Name:

Email:

Begin Signing

11 Click "Begin Signing"

budget@isu.edu

Human Resources

Name:
Compensation

Email:
compensation@isu.edu

Begin Signing

12 Click "Got it"

erit
pointment

CONTINUE FINISH LATER OTHER ACTIONS ▾

request either a temporary or permanent increase. For a bonu
as Request and Payment Authorization Form.

Department:

Adjustment Type: -- select --

Position Control Number (PCN):

or Request (check all that apply):

Market/Equity/Retention Considerations

Change in FTE/hours

Proposed Appointment:

Title:

Use the Finish Later option to continue signing this document at a later time. [Learn more...](#)

GOT IT

13 Click "Continue"

Idaho State University
Powered by docuSign

annual merit
tentative appointment

CONTINUE FINISH LATER OTHER ACTIONS ▾

ized to request either a temporary or permanent increase. For a bonus
ed Bonus Request and Payment Authorization Form.

Department:	
Adjustment Type:	-- select --
Position Control Number (PCN):	

Purpose for Request (check all that apply):

14 Provide the employee information

ISU and State policy. This form may be utilized to request either a temporary or permanent increase. For a bonus request, please utilize the Performance Based Bonus Request and Payment Authorization Form.

College/Division:	Campus Operations	Department:	Human Resources
Position Type:	Non-Classified	Adjustment Type:	Ongoing Adjustment
Employee Name:	Best Employee	Position Control Number (PCN):	000000
Purpose for Request (check all that apply):			
Job Change/Additional Duties <input type="checkbox"/>	Market/Equity/Retention Considerations <input type="checkbox"/>		
Faculty Admin Appointment Change <input type="checkbox"/>	Change in FTE/hours <input type="checkbox"/>		
Current Appointment:		Proposed Appointment:	
Title:		Title:	
FTE:		FTE:	
Appointment Months Per Year:	-- select --	Appointment Months Per Year:	-- select --
Total Annual Salary:		Total Annual Salary:	
Potential End Date:		Proposed Effective Date:	

15 Check the primary purpose for the request (select all that apply)

College/Division: <input type="text" value="Campus Operations"/>	Department: <input type="text" value="Human Resources"/>
Position Type: <input type="text" value="Non-Classified"/>	Adjustment Type: <input type="text" value="Ongoing Adjustment"/>
Employee Name: <input type="text" value="Best Employee"/>	Position Control Number (PCN): <input type="text" value="000000"/>
Primary Purpose for Request (check all that apply):	
Job Change/Additional Duties <input checked="" type="checkbox"/> Optional	Market/Equity/Retention Considerations <input checked="" type="checkbox"/>
Faculty Admin Appointment Change <input checked="" type="checkbox"/>	Change in FTE/hours <input type="checkbox"/>
Current Appointment:	
Title: <input type="text"/>	Title: <input type="text"/>
FTE: <input type="text"/>	FTE: <input type="text"/>
Appointment Months Per Year: <input type="text" value="-- select --"/>	Appointment Months Per Year: <input type="text" value="-- select --"/>
Total Annual Salary: <input type="text"/>	Total Annual Salary: <input type="text"/>
Potential End Date: <input type="text"/>	Proposed Effective Date: <input type="text"/>
Labor Distribution	
Current Appointment:	
Proposed Appointment:	

16 Enter the current and proposed position information

Employee Name: <input type="text" value="Best Employee"/>	Position Control Number (PCN): <input type="text" value="000000"/>				
Primary Purpose for Request (check all that apply):					
Job Change/Additional Duties <input checked="" type="checkbox"/>	Market/Equity/Retention Considerations <input checked="" type="checkbox"/>				
Faculty Admin Appointment Change <input type="checkbox"/>	Change in FTE/hours <input type="checkbox"/>				
Current Appointment:					
Title: <input type="text" value="Title of Now"/>	Title: <input type="text" value="Title of Tomorrow"/>				
FTE: <input type="text" value="1"/>	FTE: <input type="text" value="1"/>				
Appointment Months Per Year: <input type="text" value="12 Months"/>	Appointment Months Per Year: <input type="text" value="12 Months"/>				
Total Annual Salary: <input type="text" value="\$50,000"/>	Total Annual Salary: <input type="text" value="\$60,000"/>				
Potential End Date: <input type="text" value="11/17/2024"/>	Proposed Effective Date: <input type="text" value="11/17/2024"/>				
Labor Distribution					
Current Appointment:					
Proposed Appointment:					
Index(es)	Account	Amount	Index(es)	Account	Amount
<input type="text"/>	<input type="text" value="-- select --"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="-- select --"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="-- select --"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="-- select --"/>	<input type="text"/>

17 Enter the current and proposed index and budgetary information

Potential End Date:	<input type="text" value="11/17/2024"/>	Proposed Effective Date:	<input type="text" value="11/17/2024"/>
Labor Distribution			
Current Appointment:		Proposed Appointment:	
Index(es)	Account	Index(es)	Amount
<input type="text" value="INDEX"/>	<input type="text" value="-- select --"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="-- select --"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="-- select --"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="-- select --"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="-- select --"/>	<input type="text"/>	<input type="text"/>


Reclassification & Salary Adjus Classified_Faculty.pdf 1 of 2

DocuSign Envelope ID: 0A3ACFB9-10B1-4CB6-B659-CA3FECE46F6F

Additional information on funding source verification for proposed increase and recommendation (UBO/Budget):

18 Provide the rationale for the proposed salary increase

Primary Rationale for Proposed Salary Increase. Please explain why a salary adjustment is being requested outside of the annual merit increases process. Why is it in the best interest of the unit to consider this salary adjustment at this time? Attach additional sheets if necessary.



SIGNATURE APPROVALS REQUESTING HR REVIEW	
I confirm this document has been completed accurately and support the recommendation from the request for this salary adjustment is in the best interest of the department/college/division/university, pending HR review of applicable policy and the availability of funds.	
Supervisor:	Date:
Dean/Director:	Date:
University Business Officer:	Date:

19

Attach the required Updated Position Description and any other optional information such as an updated organizational chart and market and equity review of the salary.

The screenshot shows a document viewer interface. At the top right, there are buttons for 'FINISH', 'FINISH LATER', and 'OTHER ACTI...'. Below these is a toolbar with icons for zoom, search, download, print, share, and help. The document content includes the Idaho State University logo and a title '1 & Salary Adjustment Request: Non-Classified/Faculty'. A yellow callout box highlights a section of text: 'market and equity review depending on the increase in duties and salary change; please provide if available)'. Below this text are four attachment icons, each with a downward arrow and a paperclip icon. The first two icons are highlighted with a red dashed box, and the second one has an orange circle around it. The document text below the attachments reads: 'Request for an increase in salary for a faculty or non-classified staff employee outside of the annual Requests may be considered for reclassifications (change in title/duties), faculty title changes, changes in FTE/hours, or considerations for market, retention, and/or engagement with their leadership team utilizing analysis and criteria according to the OAR and staff positions. If the request is supported by the respective leadership team, review internal equity and market factors while also reviewing alignment with applicable forms may be utilized to request either a temporary or permanent increase. For a bonus request, please use the Performance Based Bonus Request and Payment Authorization Form.'

20

Click "Finish"

The screenshot shows a document viewer interface. The document content includes a table with the following rows:

percentage increase (annual):	
Market Data Position Match:	Market Median Salary Match:
HR Approval Signature:	Date
Additional HR approval notes:	

Revised September 2024

Reclassification & Salary Adjustment Request_ Non-Classified_Faculty.pdf 2 of 2

FINISH

Change Language