STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
DIVISION OF HUMAN RESOURCE MANAGEMENT

ACCELERATED SALARY REQUEST

POSITION INFORMATION			
DEPARTMENT:			AGENCY ID # (3 digits):
DIVISION:			BUDGET # (4 digits):
GEOGRAPHIC LOCATION OF POSITION:			
CANDIDATE/EMPLOYEE NAME:			
JOB TITLE:		JOB CODE:	POSITION CONTROL #:
GRADE:	PROPOSED STEP:	PROPOSED EFFECTIVE DATE:	

BASIS AND JUSTIFICATION OF REQUEST

☐ Meet difficult recruitment problem:

- ◯ Recruitment produced less than five eligible persons who are available.
- ◯ Recruitment deemed historically difficult.

☐ Hire person with superior qualifications.

☐ Maintain an equitable relationship between employees for reasons other than seniority.

*Note: This request MUST be **approved** prior to making a job offer at an accelerated rate. The position cannot be filled prior to receipt of approval.*

APPOINTING AUTHORITY CERTIFICATION

I certify that I have considered the salary requirements and qualifications of all eligible persons, ensured that the adjustment is financially feasible over the current biennium, and will maintain accurate records of this request.

_____ _____
FISCAL REPRESENTATIVE DATE

_____ _____
DEPARTMENT DIRECTOR OR DESIGNEE DATE

_____ _____
HUMAN RESOURCES REPRESENTATIVE DATE

GOVERNOR'S FINANCE OFFICE COMPLETION

I certify that the adjustment is financially feasible through the current biennium.

☐ APPROVED ☐ DISAPPROVED

_____ _____
BUDGET ANALYST DATE

Comment:

DIVISION OF HUMAN RESOURCE MANAGEMENT COMPLETION

☐ APPROVED Effective Date: _____
☐ DISAPPROVED

_____ _____
DHRM ADMINISTRATOR OR DESIGNEE DATE

Comment: