**STATE OF NEVADA DIVISION OF HUMAN RESOURCE MANAGEMENT**

**APPEAL OF ACCELERATED SALARY REQUEST**

(***Adjustment of Steps Within Same Pay Grade - NAC 284.204)***

|  |  |  |
| --- | --- | --- |
| 1. Agency ID #: | 2. Budget #: | 3. Dept.:       Division: |
| 4. Applicant / Employee Name:       Geographic Location of Position: | | |
| 5. Class Title: | | 6. Class Code:       Position Control # |
| 7. Grade: | 8. **\***Proposed Step: | 9. **\***Proposed Effective Date: |
| ***Briefly describe the basis of the appeal and reasons for disagreement:*** | | |

**ATTACH A COPY OF ORIGINAL NPD-04**

**NPD-04C 07/2017**