

Official Salary Adjustment Form

Employee Information

Employee Name:

Employee ID/No.:

Department:

Position/Title:

Adjustment Details

Current Salary:

Proposed/New Salary:

Effective Date:

Reason for Adjustment:

Authorization

Prepared by:

Date

Reviewed by:

Date

Approved by:

Date

Important Notes

- This form must be completed and approved before the salary adjustment takes effect.
- Ensure accuracy of all employee and salary details.
- Attach supporting documents, if required, to justify the adjustment.

- Retention of this document is mandatory for payroll and auditing purposes.