

Employee Salary Adjustment Form

Employee Information

Employee Name

Employee ID

Department

Position/Title

Current Salary Details

Current Salary

Salary Type

Select

Salary Adjustment

Adjustment Type	Amount/Percentage	Effective Date	Reason for Adjustment
<div>Select<div></div></div>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Approval

Manager/Supervisor Name

Approval Date

Additional Notes

Important Notes

- Ensure all required fields are filled accurately before submission.

- Salary adjustments must follow company policies and require appropriate authorization.
- Keep a signed copy for both HR records and employee reference.
- This form is for internal use only and contains sensitive information.