



## SPU Student Pay Raise Request Form

Student: \_\_\_\_\_ ID: \_\_\_\_\_ Dept: \_\_\_\_\_

Old Pay Rate: \$ \_\_\_\_\_ New Pay Rate: \$ \_\_\_\_\_ Effective Date: \_\_\_\_\_

Budget: Fund: \_\_\_\_\_ Orgn: \_\_\_\_\_

Supervisor (print): \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor (signature): \_\_\_\_\_

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Submit Pay Raise Request Form to the Student Payroll Office, 3<sup>rd</sup> Floor, Weter Hall