

**REQUEST FOR MARKET EQUITY REVIEW - CLAS**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

UF ID: \_\_\_\_\_ Department: \_\_\_\_\_

Affiliate/joint appointments (if any): \_\_\_\_\_

Current Rank: \_\_\_\_\_

Five-Year Salary History (as of August 16 for each year):

(  9 month or  12 month – check one)

Current Salary: \_\_\_\_\_

Year -1 \_\_\_\_\_ (last year)

Year -2 \_\_\_\_\_

Year -3 \_\_\_\_\_

Year -4 \_\_\_\_\_

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**To be filled out by Academic Department/Center and College**

Date received by department: \_\_\_\_\_

Recommendation of department committee:  support  do not support

Amount recommended by chair (if any) \$ \_\_\_\_\_

Date forwarded to Office of the Dean \_\_\_\_\_

Recommendation of Dean:

increase recommended  increase not recommended Amount \$ \_\_\_\_\_

Date forwarded to Office of the Provost: \_\_\_\_\_