



State of Delaware  
Department of Human Resources

**Advanced Starting Salary Request Form**

**DHR Statewide Operating Procedure #: To be assigned**

**Authority: Merit Rule 4.4, 4.4.2, 4.4.3**

**Effective Date: January 11, 2021**

**Supersedes: Salary Analysis Request Form (March 5, 2019); Advanced Starting Salary Request Form (June 10, 2020)**

**Signature Section**

Department of Human Resources/Office of the Secretary

Typing OR signing your name will constitute signature.

\_\_\_\_\_  
Secretary, Department of Human Resources

Approve  Deny Date: \_\_\_\_-\_\_\_\_-\_\_\_\_

Approved Annual Advanced Starting Salary \_\_\_\_\_

Office of Management and Budget Director and Controller General Signatures Required for Leveling Up and Budget Line Item

Typing OR signing your name will constitute signature.

\_\_\_\_\_  
Director, Office of Management and Budget

Approve  Deny Date: \_\_\_\_\_

\_\_\_\_\_  
Controller General

Approve  Deny Date: \_\_\_\_\_

**Approved: Effective date:** \_\_\_\_\_  **Denied: Date:** \_\_\_\_\_

**Agency Human Resources: Part 1**

Agency Request with Appointing Authority Approval and Notification to Agency Fiscal Representative

Upon submission of the request, a copy to the appointing authority or designee serves as the signature approval of the appointing authority or designee, and acknowledgment that the statements provided in this request form are correct and complete, and that funding is available to support this request within the current budget.

Agency Fiscal Designee Name: \_\_\_\_\_

**Check the type of Request:**

Advanced Starting Salary-New Hire  Advanced Starting Salary-Promotions

Advanced Starting Salary- Voluntary Demotion  Advanced Starting Salary with Leveling Up

Budget Line Item

**Contact Name**

**Contact Email**

**Contact Phone Number**

**Agency Human Resources: Part 2**

**Agency and Candidate Information**

1. Department/Division/Section Name: \_\_\_\_\_
2. Department/Division/Section Number: \_\_\_\_\_
3. Acceptance of an offer to external candidate (outside State employment) contingent upon approval of this request:  
 YES    NO
4. Applicant/Employee Name: \_\_\_\_\_
5. BP#: \_\_\_\_\_
6. Entering Classification Title/Job Code/PG: \_\_\_\_\_
7. Current Classification Title/Job Code/PG: \_\_\_\_\_
8. Requested Salary: \_\_\_\_\_
9. Designated Line Item Salary (For Line Item Salary Request only): \_\_\_\_\_
10. Current Salary: \_\_\_\_\_
11. Effective Date of Action: \_\_\_\_\_

**Agency Human Resources: Part 3**

Provide a detailed explanation of how the applicant meets/exceeds each job requirement of the class, as copied from the class specification (selective requirements as copied from the job posting). Cite specific examples and number of years performing each job requirement. This section does not apply to Line Item requests. Please attach additional page(s) if needed.

Job Requirement	Explanation

**Agency Human Resources: Part 4**

**Equity Chart**

Attach an equity chart for all advanced starting salary requests, which follows the example below. The name of the employee/candidate for whom the salary analysis has been requested inserted in the first row, with the requested salary amount and percentage of midpoint listed. In column four (4) please list the employee's **previous work experience with most recent work first**. In the subsequent rows, list all the employees in the class that will be equaled or bypassed if the requested salary is approved in chronological order with highest salary first.

Provide an explanation as to why the requested employee/applicant can bypass the other employees in the class. If the position requires knowledge of supervision or experience, fill in the column for Years of Supervisory knowledge, for each employee. If there are no other employees in the same class, compare employees comparable classes in the same paygrade, in the same occupational grouping and/or review employees in the same organizational reporting line to determine equity. The first line is an example of how to complete the chart. This section does not apply to Line Item Salaries.

<b>Advanced Starting Salary Request Form</b>	<b>Procedure #: To be assigned Rev. Date: January 11, 2021</b>
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1	2	3	4	5
<b>Employee Name Salary and % MP</b>	<b>Education</b>	<b>Years of Relevant Work Experience Starting with most recent list each previous job with number of years of experience in each.</b>	<b>Years of Supervisory Experience or Knowledge (if applicable)</b>	<b>Years of State Service</b>
Sally Sample \$35,725 (90%)	Bachelor's Psychology	15 years 2 months Total Relevant Experience 1 year Administrative Specialist II/DHR 2 years 2 months Office Manager/ABC Plumbing 6 years 6 months Executive Assistant/Smith Construction 4 years 6 months Secretary/Jones and Jones Law Firm	2 years 2 months/ Office Manager	2 years

**Agency Human Resources: Part 5**

Provide any additional information to consider for request and/or for Leveling Up/Line Item Request.

<b>BP#</b>	<b>Job Title</b>	<b>Name</b>	<b>Current Annual Salary</b>	<b>Proposed Annual Salary</b>	<b>OECs</b>	<b>Cost</b>
Example			\$ 38,023.00	\$ 42,000.00	1.3233	\$ 5,263