

TOMPKINS CORTLAND COMMUNITY COLLEGE
170 North Street, Dryden, New York 13053
SALARY AGREEMENT AMENDMENT

EMPLOYEE NAME: _____

DATE OF SALARY AGREEMENT BEING AMENDED: _____

EFFECTIVE DATE OF CHANGE: _____

EXPLANATION FOR AMENDMENT:

CURRENT SALARY AMOUNT _____

CHANGE IN SALARY (+ or -) _____

NEW ADJUSTED TOTAL _____

SIGNATURES:

Divisional Dean Date

Human Resources Date

Budget and Finance Date

Employee Date

CALCULATION:
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