

**PORTLAND STATE UNIVERSITY**  
**CASH AWARD FORM**  
 FOR  
 EMPLOYEES IN OPEU-REPRESENTED  
 INFORMATION TECHNOLOGY CLASSIFICATIONS

Employee Name	Employee Social Security Number
Classification	Position Number
Supervisor submitting this request	Date of this Request
Index Code for Funding Source of Increase	Amount of Cash Award
Dates and amounts of any other cash awards given within the last evaluation year	
Justification for Cash Award	

Reviewed with ad hoc committee and agreement reached (list committee members below)

Signature of Supervisor \_\_\_\_\_

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

Signature of Dept Head, Director, or Dean \_\_\_\_\_

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

Human Resources Office Use Only

Approved by Compensation Manager \_\_\_\_\_