

## **Increased Personnel Action Review (IPAR) Form**

*Directions: Please complete this form with as much detail as possible. Please be sure to include an updated organizational chart. Any information not requested below will be requested in Page-Up or other required paperwork.*

**Position Title:**

**1. Please explain the specific reason for the request to fill this position and/or salary adjustment. Including the function of this position, its responsibilities and the direct impact on core and essential business operations:**

**2. Explain the methodologies and/or options that have been explored and exhausted to avoid filling the position and/or requesting a salary increase. (i.e. reviewing the current organization, distribution of job duties to other staff, elimination of duties, consolidation with other areas) Please include an explanation of how the proposed alternative actions are not an adequate solution.**

**3. Explain how the job responsibilities are currently being fulfilled.**

**4. Explain the responsibilities that can be performed by other staff and/or eliminated.**

**5. Please explain the negative impact on essential or critical business operations if delaying or denying the requested action.**

**6. Please indicate how this proposal is related to the University's mission and our Strategic Plan as well as the UW System's mission.**

**7. What, if any, impact will this have on any accreditation status held by your department?**

**8. Please indicate how this proposal will impact university operations.**

**9. If not filled, what is your alternative plan.**

**We are requesting an exception to the 90 day wait time due to:**