



Your Agency Letterhead

Assignment Differential Awareness Statement Sample

I, _____, acknowledge that a request for a temporary salary adjustment in the form of an assignment differential is being requested with an effective date of _____ in the dollar amount/percentage of _____.

I also acknowledge that both the effective date and amount of this assignment differential are contingent on approval from the Department of Human Resources and the Department of Finance and Administration and are subject to change from what is listed in this letter.

I further acknowledge this temporary salary adjustment must be removed when I stop performing the duties associated with this assignment differential.

Employee Signature: _____ Date: _____

SAMPLE