

STATE UNIVERSITY OF NEW YORK COLLEGE AT CORTLAND

MODIFICATIONS TO PERFORMANCE PROGRAM

Modification to Performance Program of \_\_\_\_\_

for period \_\_\_\_\_ to \_\_\_\_\_.

Changes and/or increases in duties or responsibilities:

\_\_\_\_\_  
SIGNATURE OF EMPLOYEE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF SUPERVISOR

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF SUPERVISOR'S SUPERVISOR

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF VICE PRESIDENT

\_\_\_\_\_  
DATE

These signatures reflect agreement on these modifications to the Performance Program. This form should be accompanied by a "Request for Review" form when forwarded to the Vice President so that salary increase or promotional considerations can be addressed.

DISTRIBUTION:

- OFFICIAL HUMAN RESOURCES FILE
- EMPLOYEE
- SUPERVISOR
- SUPERVISOR'S SUPERVISOR