

[Company Header/Logo]

[Date]

[Employee Name]

[Employee Address]

[City, State, Zip Code]

**Subject: Transition to New Exempt Role and Compensation Adjustment**

Dear [Employee Name],

We are pleased to formally confirm your transition to the position of [New Job Title] within the [Department Name] department, effective [Effective Date].

As part of this transition, your compensation has been adjusted to reflect your new responsibilities. Your new annual base salary will be \$[Amount], paid in accordance with the company's standard payroll schedule. This position remains classified as exempt, meaning you are not eligible for overtime pay under the Fair Labor Statistics Act (FLSA).

In this role, you will report directly to [Manager Name], [Manager Title]. Your primary responsibilities will include:

- [Key Responsibility 1]
- [Key Responsibility 2]
- [Key Responsibility 3]

All other terms and conditions of your employment, including your original hire date and accrued benefits, remain unchanged unless otherwise specified in your updated benefit summary.

Please acknowledge your acceptance of this role transition and the updated compensation terms by signing and returning a copy of this letter by [Deadline Date].

We appreciate your continued contributions to [Company Name] and look forward to your success in this new capacity.

Sincerely,

[Signature]

[Sender Name]

[Sender Title]

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**Acknowledgment:**

I accept the new role of [New Job Title] and the compensation adjustment as outlined above.

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