REQUEST FOR JOB RECLASSIFICATION

Date:	-
Name:	
Current Classification:	
Classification Requested:	

Representative Duties and Responsibilities (use additional paper as necessary)

1. List the duties and responsibilities that you perform outside your present job classification:

2. List the additional abilities/skills you believe a person must possess to successfully perform these additional duties/responsibilities:

Briefly describe how this new classification better suits your daily responsibilities.

Employee's Signature

Exhibit IV – Job Reclassification Form

REQUEST FOR JOB RECLASSIFICATION Supervisor's Recommendation

Date: _____

Employee's Name: _____

Current Classification:

Classification Requested:

I do recommend do not recommend this job classification request. (circle one)

Please comment on your recommendation and/or justification for this reclassification request.

Supervisor's Signature