

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