

Request for Classification Action

<i>Supervisor/Manager (Printed Name)</i>		<i>Department</i>		<i>Campus</i>	
				<i>Phone</i>	
Purpose	<input type="checkbox"/> Classification (New Position) <i>(See notes 1, 4)</i>		<i>For HR Use</i>		
	<input type="checkbox"/> Reclassification (Existing Position) <i>(See notes 2, 4)</i>				
	<input type="checkbox"/> Modification of Existing Position <i>(See notes 2, 4)</i>				
	<input type="checkbox"/> Regrading of Existing Class <i>(See note 3)</i>				
<i>Position Title</i>			<i>Position Number</i>		
<i>Class Title</i>			<i>Class Code</i>		
Notes	1. Supervisor or person with first-hand knowledge of duties to be performed must complete request. Form 2-1-090 must accompany request.				
	2. If position is filled, request must be completed by incumbent and validated by management. If a position is vacant, request must be completed by supervisor or person with first-hand knowledge of duties assigned to the position				
	3. Regrading affects all positions in a class, regardless of department or locate. List all known positions affected by this requested action.				
	4. The creation or abolishment of a full-time position requires an explanation of Org Chart impact. Attach applicable portion of Org Chart showing suggested placement and/or realignment.				
<i>Rationale, comparable classifications, list of affected positions, etc: (If additional space is required, continue on separate sheet.)</i>					
<i>Initiator Signature</i>		<i>Date</i>		Human Resources	
				<i>Date Time Stamp</i>	
<i>Campus President / District VP Signature</i>		<i>Date</i>			
<i>List of attachments</i>					
<input type="checkbox"/> Request to Establish Position (2-1-090)					
<input type="checkbox"/> Position Description <input type="checkbox"/> Suggested Org Chart change					

		<i>Control Number</i>		<i>Issued by</i>	

POSITION DESCRIPTION

Most Important Position Responsibilities / Duties	Essential Duties	% of time	For HR use only
Example: Total accounts, check math and prepare reports.	*	20%	
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
		100%	
Identify any of the above tasks which have been added in the last year by listing the numbers (1 thru 10) of the new tasks: » _____			
Signatures below indicate review of form only			
<i>Employee Signature & Date</i>	<i>Supervisor/Manager Signature & Date</i>		
<i>Additional comments may be attached on a separate sheet.</i>			