CLASSIFIED EMPLOYEE REQUEST FOR POSITION RECLASSIFICATION/UPGRADE

Na	me: Date:	Date:	
Sit	e/Department:	_	
Su	pervisor:	_	
Hir	e Date: Current Position:	_	
Lei	ngth of Service in Present Position: Current Range:	_	
Re	quested Position (if applicable):		
1.	Please check one or more of the criteria that apply to your request for reclassification/upgra	ide:	
	New job duties have been permanently added to the position by my supervisor that are in my current job description. (Reclassification)	e not	
	□ The job classification salary is not aligned with similar job classifications salaries within S and/or other districts/COEs. (Upgrade)	COE	
	Other. Explain:	_	
2.	Provide a summary of the reason(s) you believe your position should be reclassified or upgra and any additional information that will assist in evaluating this request. Include how ofter perform any additional duties per day.		
		_	
		_	
		_	
		_	
		_	
		_	

3. If requesting an upgrade, you must compare job descriptions and salary to similar positions in the following districts/county offices:

<u>Districts</u>	County Offices
Benicia USD Dixon USD	Alameda COE Contra Costa COE
Fairfield-Suisun USD	Napa COE
Travis USD	Sacramento COE
Vacaville USD	San Joaquin COE
	Yolo COE

If you are unable to find positions within the above districts/COEs that are not comparable to yours, you must note that on your salary compare.

4. Attach a copy of the current job description and the job description which you believe your position should be reclassified/upgraded to. Include comparisons of duties between your current position and the requested position. If there is not a similar position, you must identify what duties are not in your current position and indicate that there are no similar positions.

If requesting an upgrade, attach a comparison of your current job description and salary to the job description and salary of the similar position. If similar positions do not exist, you must note that one does not exist.

Per Article 18.1.2, this request shall be submitted to the Human Resources Department no later than March 20th, 5:00 p.m. of each year

Print Name:

Signature:

Date:

Attachment: Article 18, CSEA Contract Reclassification/Upgrade Instructions