

To be completed by department head/chair

Department: _____ Current Job Title: _____

Position Control #: _____ Incumbent: _____

Instructions: Check proposed change(s) and complete appropriate section(s) below.

Proposed Change: A. Job Title B. FTE Change C. Minor Job Descr. Change D. Major Job Descr. Change/Salary Grade Review

A. JOB TITLE CHANGE

Proposed Title: _____ Effective Date: _____

B. FTE CHANGES

Attach written justification to address reasons for change (changes in work load, external forces, etc.) and describe existing and proposed schedules.

Current Annual FTE: _____ Proposed Annual FTE: _____ Effective Date: _____

Proposed Schedule: # of Weeks: _____ Hours per Week: _____

Financial Impact and additional comments (*to be completed by Budget Director*):

C. MINOR JOB DESCRIPTION CHANGE

Attach new and old descriptions and highlight change(s). No change in salary grade classification is anticipated.

Reason for Change: _____

D. MAJOR JOB DESCRIPTION CHANGES/SALARY GRADE REVIEW

Part 1 Department Head *Attach the following:*

- Current and proposed job description.
- Written justification including any impact on other positions.

Current Grade: _____ Proposed Grade: _____ FTE: _____

Part 2 Human Resources Review (*to be completed by Human Resources*)

Results of Review: No change in grade New grade assignment: _____

REQUIRED SIGNATURES

Department Head

Date

Budget Director (if applicable)

Date

Senior Administrator

Date

Human Resources Approval

Date

Return original form to: Human Resources, 30 Belmont Avenue