

Position Reclassification Process

Overview

A classified or professional employee, or a supervisor of a position, who feels a job has significantly changed may request a position review.

Conditions for a Request

1. An employee who has been in that position for at least twelve (12) months; provided, however, that the position has not been reevaluated within the last twenty-four (24) months.
2. A group of employees with the same or similar job titles; provided, however, that job title has not been reevaluated or reclassified within the past twenty-four (24) months.
3. An employee in a position which has been reevaluated in the last twenty-four (24) months but who has reason to believe that the assigned duties are significantly different than those specified in their position description. In the event the employee can demonstrate that their job duties are significantly different than those specified in their position description, the Employee may submit a request for a special reevaluation to the Human Resources Director or her/his designee, who may waive any time limitation.
4. A vacant position

Classified Employee Procedures and Timelines

A request for a position reevaluation shall be submitted to the Human Resources Director or her/his designee on the Request for Position Evaluation form. Some sections may not be applicable to the position. Requests by an individual or by members of a group shall be forwarded to the Human Resources Office with a copy sent to the employee's immediate supervisor and to the Union. The Human Resources Director or her/his designee shall forward the request along with findings and recommendations to the Executive Team for review and determination.

Requests will be evaluated in November and May of each year. Applications received after November 1 will not be considered until the May meeting, and applications received after May 1 will not be considered until the November meeting. Each affected employee, supervisor, and union shall be furnished a copy of the decision within thirty (30) calendar days of the date of the Executive Staff determination meeting.

Professional Employee Procedures and Timelines

Please complete the Request for Position Evaluation form with as much detail as possible. Some sections may not be applicable to the position.

If an employee has completed the form, it should be forwarded to the supervisor, who should review it and forward it to the Human Resources Office.

Decision

The employee and/or supervisor will be furnished a copy of the decision within thirty (30) calendar days of the date of the Executive Staff determination meeting. The decision may include, but is not limited to the following: 1. Reclassification to a higher or a lower job classification 2. No change in job classification 3. Salary increase, or 4. No salary increase.

An employee whose position is reclassified shall be paid retroactively thirty (30) days prior to the date (Nov 1 or May 1) of application for a review, or the date that the duties were assumed, whichever is later, to a maximum of 90 days retroactive reimbursement.

POSITION SCOPE AND IMPACT

Explain the impact this position has within the department, to the College, and to the community as applicable.

Describe its customer base, both internal and external to the College, which this position works with most closely.

INDEPENDENT JUDGMENT AND DISCRETION

Provide examples of the types of problems/decisions that this position is responsible for solving independently. Include examples where it is necessary to use analysis, fact finding or creativity. Indicate if these are new responsibilities and explain why.

In what difficult situations does this position make independent judgements? In what situations would this position seek advice/approval from supervisor? Indicate if these are new responsibilities and explain why.

What responsibility does this position have for establishing, interpreting, and/or implementing plans, policies or procedures? Provide examples that demonstrate this responsibility.

Describe the type of financial decisions this position makes, and the effect that these decisions have on the overall operating or financial success of the department or College.

If applicable, include the annual budget amount for which this position has oversight.

JOB REQUIREMENTS

Please list any **new** licenses, training, skill, education, or certifications that are required for the successful completion of this job. Explain why.

SUPERVISORY RESPONSIBILITIES

Designate the type and number of staff this position supervises using the following categories: temporary, student worker, independent contractor, classified or professional.

Has this changed since last position review or hire?

If yes, check off the primary supervisory responsibilities of this position.

- Directs the work of supervisees and assigns significant tasks. Provide examples:
- Independently prepares and delivers performance evaluation(s).
- Interviews and makes recommendations for hires of staff.
- Takes disciplinary action.
- Makes recommendations for terminations.

FISCAL IMPACT

Designate the source of funding for this position.

If the position, or a portion of the position, is grant funded, do the terms of the grant allow a reclassification or salary increase?

Budget Office: What is the estimated annual wage cost of this reclassification request?

Budget Office: Is continued funding available for this request?

COMMENTS AND SIGNATURES

EMPLOYEE'S COMMENTS:

EMPLOYEE'S SIGNATURE AND DATE: _____

SUPERVISOR'S COMMENT:

SUPERVISOR'S SIGNATURE AND DATE: _____

HUMAN RESOURCES

INTERNAL BENCHMARK

Name	Job Title	Start Date	Paygrade	Pay Rate

EXTERNAL BENCHMARK

Type	Job Title	Reference	Median	% Difference

ANALYSIS:

EXECUTIVE TEAM

REVIEW:

DECISION:

FISCAL IMPACT:

EFFECTIVE DATE:

HR ONLY

Supervisor/EE PAR New Job Description Paycor AllEE