



EMPLOYEE REQUEST FOR RECLASSIFICATION

(Form must be completed and submitted by no later than FEBRUARY 28TH of the current school year)

In accordance with section 3:5.13f of the CSEA collective bargaining agreement, *the unit member may submit a request that their position be reclassified. The request shall be submitted to the Human Resources Department.*

Unit Member: _____ Date: _____

Position: _____ Location: _____

Please check the criteria which apply to your request for reclassification:

<input type="checkbox"/>	New job duties requiring a significant increase in responsibility and/or expertise are added to the position
A need for change has been identified which would be characterized by one or more of the following:	
<input type="checkbox"/>	The gradual increase of the duties being performed by the incumbent(s) in such position [See Ed. Code sec. 45101(f)]
<input type="checkbox"/>	An increase in the complexity of the duties being performed by the incumbent(s)
<input type="checkbox"/>	An increase in the knowledge and skills necessary to perform the duties of the classification
<input type="checkbox"/>	The range placement is inconsistent with positions of similar responsibility and difficulty in the Novato Unified School District
<input type="checkbox"/>	Other (please describe in detail below) _____ _____ _____

As described in Article 3:5.13f, in addition to a statement please include the following with the Reclassification Request Form if available:

- Current job description
- List of new duties