CSEA PROPOSAL
6.8.2017

RECLASSIFICATION

The purpose of reclassification is to look at positions (not people) where duties and tasks have changed significantly, consistently and such duties are not contemplated in the current job description. Reclassification is not designed to provide additional compensation, nor to reward the high-quality worker; it is not merit pay; it is not to be confused with additional work. * *Note: If you are working or believe you are performing duties that are not in an existing job description, that does not preclude you from filing for a reclassification under Article XXXIII.*

GUIDELINES FOR RECLASSIFICATION REQUESTS FOR CLASSIFIED EMPLOYEES

1. If an employee feels that the duties he/she currently performs differ significantly from those outlined in the current classification description, the reclassification process is available as an avenue of review.

2. Only requests dealing with individuals will be reviewed by the Committee. No "class-action" type requests will be accepted for review.

3. Application requests for Reclassification must be completed and turned in to the Human Resources Department by October 1 for Fall consideration and March 1 for Spring consideration.

4. In order to be considered for reclassification, the employee must be consistently asked to perform tasks not contemplated in his/her job.

5. The process consists of four (4) levels which are as follows:

First Level:

Employee obtains appropriate forms from the Human Resources Department or the District Website in which the employee clearly describes the tasks which differ from the present job classification.

Second Level:
Upon completion and return of the employee's forms, the immediate supervisor (immediate supervisor is the lowest level supervisor having immediate jurisdiction over employee) is requested to review the application and provide input regarding job responsibilities.

Third Level:
At this level the Assistant Superintendent of Human Resources or their designee is asked to review and verify reclassification request documents are complete and submit it to the Reclassification Committee who will then make their determination. This determination may include a change to the unit member's job description and/or salary range.

Fourth Level:
Upon final approval of the reclassification, the employee shall receive the change in salary grade effective retroactively to July 1 for Fall consideration and retroactively to January 1 for Spring consideration. See Article XXXIII in the contract.

YUBA CITY UNIFIED SCHOOL DISTRICT
CSEA CHAPTER #265
CLASSIFIED PERSONNEL REQUEST FOR RECLASSIFICATION
TO BE COMPLETED BY CLASSIFIED EMPLOYEE

_____

Name: **Last** **First** **Date**

Current Job Title: _____ Salary Grade: _____

Significant and Consistent Change of Required Duties Not in Current Job Description.

Please refer to you current job description and list the significant and consistent change of **required** duties not in your current job description. List these changes of tasks and duties separately and indicate the percentage/hours that you spend on these tasks/duties each week.

A. _____%/ Hrs_____

B. _____%/ Hrs_____

C. _____%/ Hrs_____

D. _____%/ Hrs_____

E. _____%/ Hrs_____

F. _____%/ Hrs_____

Total %/ Hrs_____

Please list any additional information below:
State any changes in the qualifications for your position (skills, knowledge, ability).

_____

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I certify that I have read the guidelines, that the entries made above (or attached) ARE MY OWN and to the best of my knowledge are accurate and complete. (Attachments must be dated and signed.)

_____ _____

Signature of Employee **Date**

YUBA CITY UNIFIED SCHOOL DISTRICT
CSEA CHAPTER #265
CLASSIFIED PERSONNEL REQUEST FOR RECLASSIFICATION
TO BE COMPLETED BY IMMEDIATE SUPERVISOR

Please refer to employee's current job description and state below the duties and tasks, not contemplated in this current job description, which you are currently **requiring** this employee to perform on a significant and consistent basis.

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Signature of Immediate Supervisor **Date**

YUBA CITY UNIFIED SCHOOL DISTRICT
CSEA CHAPTER #265
CLASSIFIED PERSONNEL REQUEST FOR RECLASSIFICATION
TO BE COMPLETED BY ASSISTANT SUPERINTENDENT of HUMAN RESOURCES

Name	**Date of Last Upgrade**
Present Range	**Range Requested**

Please verify reclassification documentation request is complete and if not list below information still needed or recommendation of documentation that might be included.

Signature of Asst. Superintendent of Human Resources	**Date**

YUBA CITY UNIFIED SCHOOL DISTRICT
CSEA CHAPTER #265
CLASSIFIED PERSONNEL REQUEST FOR RECLASSIFICATION

TO BE COMPLETED BY RECLASSIFICATION COMMITTEE

RECOMMEND APPROVAL: ❑ Yes ❑ No

CLASSIFICATION: NEW: _____ EXISTING: _____
TITLE TITLE

EXPLANATION OF RECOMMENDATION: _____

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_____ _____
Signature of Reclassification Committee/CSEA **Date**

_____ _____
Signature of Reclassification Committee/District **Date**