



REQUEST FOR REVIEW OF CLASSIFICATION – COVER SHEET

Details of Role to be Reviewed		
Current Title of Role: _____	Department & Site: _____	Current Classification: _____
Prospective Title of Role: _____	Prospective Classification: _____	
Name of Employee within Current Role: _____	Name & Title of Immediate Manager: _____	
Rationale for Reclassification		
<p>The Request for Review of Classification must address the following matters:</p> <ul style="list-style-type: none"> • A summary of the current role • A summary of how the role has changed • Evidence and justification as to why the role should be reclassified • A response to the Classification Descriptors from relevant Agreement <p><i>How the role has changed and provide evidence and justification as to why they believe the position should be reclassified. Also include when the reclassification is being proposed to be effective from - if prior to application date, please provide justification.</i></p>		
Supporting Documentation		
<p>The Request for Review of Classification must be accompanied by the following supporting documentation:</p> <ul style="list-style-type: none"> • Current Position Description • Prospective Position Description • Current Department/Unit Reporting Line/Chart • Prospective Department/Unit Reporting Line/Chart • Classification Descriptors from relevant Agreement <p><i>Staff are required to supply their current Position Description and a copy of their department's structure with the names of incumbents.</i></p> <p><i>If there has been a change to structures then staff must supply their old and new Position Description as well as the old and new structure.</i></p>		
..... Employee Name: Employee Signature Date



LINE MANAGER'S RECOMMENDATION	NAME:	
	<input type="checkbox"/> APPLICATION SUPPORTED	<input type="checkbox"/> APPLICATION <u>NOT</u> SUPPORTED
	Signature:	Date:
COMMENTS:		

Manager	NAME:	
	<input type="checkbox"/> APPROVED	<input type="checkbox"/> NOT APPROVED
	Signature:	Date:
COMMENTS:		

PEOPLE & CULTURE USE ONLY	
File Number:	Date Received:
Outcome: <input type="checkbox"/> Recommended <input type="checkbox"/> Declined	
COMMENTS:	