**REQUEST FOR RECLASSIFICATION/REALLOCATION**

A request for reclassification/reallocation may be initiated by management, bargaining unit, or by the employee. The employee must be a permanent classified worker and must have been performing the work, which is the basis for the reclassification request for at least six (6) months before the reclassification/reallocation request. To make a request for reclassification/reallocation, management, bargaining unit, or employee shall submit a request for reclassification to the Associate Superintendent for Human Resources by December 15**.** A copy shall be sent to the CSEA Chapter President and it is recommended that the employee keep a copy for his/her files. Forms are available from the school sites, personnel office, or bargaining unit representative.

Reclassification/Reallocation Process Time Line

Forms available year round.

December 15 Reclassification/reallocation applications due to Associate Superintendent for Human Resources, CSEA Chapter President, and retain a copy for personal file

Jan. 1 - Jan. 15 Committee members identified by TUSD and CSEA

Jan. 16 - April 1 Reclassification/reallocation committee meets and makes recommendations to the negotiating teams.

April 2 - May 14 Negotiating teams will meet and seek agreement. CSEA will submit recommendation for ratification from the membership.

May 15 - June 30 Associate Superintendent for Human Resources forwards the ratified agreement to the governing board for a final decision no later than the second regular board meeting in June.

**Appendix C, cont.**

**TRACY UNIFIED SCHOOL DISTRICT**

**RECLASSIFICATION/REALLOCATION REQUEST FORM**

EMPLOYEE NAME:

SITE: DEPARTMENT:

CURRENT CLASSIFICATION/RANGE:

REQUESTED CLASSIFICATION/RANGE:

NUMBER OF YEARS/MONTHS IN CURRENT CLASSIFICATION/RANGE:

NOTE: Pursuant to Article XL, Reclassification Requests, an employee who has applied for or received a reclassification/reallocation may not apply for or be subject to another reclassification/reallocation within the same job classification for at least two years from the date of the last reclassification/reallocation and/or request.

I. Indicate the duties you are performing on an on-going basis which you believe to be OUTSIDE your current classification/JOB DESCRIPTION.

 (Please type or print.)

(attach additional pages if necessary)

II. How do these additional duties impact your overall responsibility and authority?

**Appendix C, cont.**

**TRACY UNIFIED SCHOOL DISTRICT**

**RECLASSIFICATION/REALLOCATION REQUEST FORM (page 2 of 2)**

III. Describe how these additional duties affect the qualifications (knowledge, abilities, education, experience, licenses and certifications) required for your classification/JOB DESCRIPTION?

I request an interview with the reclassification committee

 ⬜ Yes ⬜ NO

 Employee’s Signature\* Date

***\*NOTE: Employee should submit completed form to the Associate Superintendent of Human Resources and the CSEA President (we suggest that you keep a copy for your files) no later than December 15. Attach a copy of your current job description; a copy of the proposed job description; or any additional supporting documentation.***

**The request shall include the following documents:**

* **a completed reclassification/reallocation request form**
* **a copy of your current job description**
* **a copy of your proposed job description**
* **any additional supporting documentation**

Revised: 3/10/06

Revised: 12/8/15