



Request for Classification Review

Employee Name: _____

Position Title: _____

Location: _____

Current Grade: _____

Supervisor Name: _____

Please provide a revised job description, including an explanation of justification below. Attach additional pages as needed.

Employee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Chief Officer/Exec Director Signature: _____ Date: _____

By signing as Supervisor, I attest that the attached revised job description accurately reflects the duties associated with this position.