SANTA ROSA CITY SCHOOLS
Excellence is our Common Ground

RECLASSIFICATION PROCESS – CSEA 75

1. Background/Purpose:
   a. Every CSEA 75 position at the Santa Rosa City Schools is placed in a class.
   b. Reclassification is a change in an individual's title and/or job description using the following criteria: The duties being performed by the employee who currently occupies the position are inconsistent with their current classification.
   c. Reclassification is not a mechanism for salary increases
   d. Reclassification may or may not result in a promotion.
   e. This reclassification process will only apply to an individual.

2. Reclassification Criteria:
   a. Reasons that may be a basis for reclassification:
      1. Significant new job duties that are permanently added to the job or job description by the supervisor.
      2. Significantly increased responsibilities; other than increased workload, have been permanently added to the position by the supervisor
   b. Reasons that are not a basis for reclassification:
      1. Longevity and/or seniority
      2. Excellence in work performance
      3. Workload
      4. Assuming duties on one's own behalf without the knowledge of management.
      5. Changes in process or technology that do not result in an increase in workload.

3. Request for Reclassification:
   a. Reclassification requests will be only accepted until the last workday of October.
   b. Any employee requesting a reclassification shall not be eligible to resubmit another request for two years.
   c. Reclassification is open to any permanent employee.
   d. Any employee who believes they are eligible for reclassification consideration shall complete and submit, to the Director of Human Resources, a Reclassification Packet by 5:00 p.m. on the last workday in October. Incomplete packets will not be considered and the employee will not be eligible to submit another request for two (2) years.
   e. Any employee who is requesting a reclassification shall submit a completed Reclassification Packet with all required attachments and signatures. Incomplete packets will not be considered and the employee will not be eligible to submit another request for two (2) years.
   f. The employee will be available to meet with the panel.

4. Reclassification Process: All requests, which meet the criteria, shall be reviewed by a panel which consists of the following: One (1) CSEA appointee, one (1) Human Resources appointee, and one (1) neutral party that is chosen by both CSEA 75 and the District. The neutral party shall not be an employee of the District. The cost of the neutral party shall be paid by the District
   a. The review panel shall meet in January of each year.
   b. The recommendation of the panel shall be advisory and forwarded to the Superintendent (or designee) for final action.
   c. A copy of the panel's recommendation to the Superintendent will be sent to the employee within 10 working days of the panel's meeting date.

5. Review Panel: When considering a possible reclassification, (the internal consistency/ integrity of the salary schedule cannot be disrupted) the panel shall have the authority to recommend the following:
   a. Reclassification and/or salary range placement

b. Changes or updates to the job description
c. Creation of a new classification or range

6. Final Decision:
   a. The Superintendent (or designee) will notify the panel and the employee of the final decision within 6 weeks of the panel's meeting date. All reclassifications must be approved by the Board. Reclassification decisions cannot be appealed.
   b. Upon reclassification of an individual position, the position shall be placed on the step and range of the new classification that provides at least a five percent (5%) salary increase. All approved reclassifications shall take effect the following July 1st unless special circumstances are supported by the panel and approved by the Superintendent (or designee).
   c. Reclassification shall not affect the employee's anniversary date.
   d. If it is agreed the employee has been working out of class, but is not being reclassified, then the employee will be notified in writing that they are no longer responsible for the out-of-class duties. The employee will be paid an appropriate out-of-class differential for the time in which they worked out-of-class.

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RECLASSIFICATION REQUEST – CSEA 75

Human Resources Department
211 Ridgway Avenue
Santa Rosa, CA. 95401

DATE

NAME

Last | First

POSITION

Title | Location

Current Step on Salary Schedule | Supervisor

WORK PHONE

E-MAIL ADDRESS

OTHER POSITIONS HELD AT THE DISTRICT

QUESTIONNAIRE

1. Does your current Job Classification accurately describe your position? ____ Yes ____ No
2. If not, what Job Classification do you believe better describes the position, and why? (**You must attach your current job description and the job description and salary placement of the classification you feel better describes your position**).

SPECIFIC DUTIES

A. Job Duties and Responsibilities – Describe in detail the regular duties and work that you perform. List each duty on a separate line. Begin with those duties you feel are most important. Indicate the approximate percent of your total work time you spend on each duty. This should add up to 100%.

Job Duty	% of Time

B. What machinery or equipment/technology do you use in performing the above tasks?

3. List the SPECIFIC changes that have occurred in this job and note how the changes took place. (i.e. Supervisor request, new technology, etc.)

4. If scope, complexity, percent of time or frequency has changed, but duties are essentially the same, explain here:

5. What records do you regularly maintain or prepare?

6. What reports do you prepare or supervise the preparation of?

7. Describe the most difficult and/or major decisions you make in the course of your work?

8. What review is made of your decisions by others?

9. What is the amount/type of budget for which you have direct accountability?

10. Do you supervise any one directly or indirectly? _____ Yes _____ No

If Yes, please provide information on who you supervise, what tasks you supervise, and any other information about staff supervision.

11. Please list any specialized training that you have had for your current position.

12. Please list any additional training that you have had related to your request for reclassification.

SUPERVISOR'S REVIEW

1. Have you reviewed this questionnaire, and does it accurately reflect your assessment of the employee's current job duties?

   _____ Yes _____ No

2. If not, please explain below:

Signature of Supervisor/Administrator **Date**

Signature of Applicant **Date**

Document must be received in the Human Resources Department by the last workday in October