

REQUEST FOR SHORT TERM OUT-OF-CLASS ASSIGNMENT (submit via President/Vice Chancellor *in advance*)

DATE: _____

TO: HUMAN RESOURCES/CLASSIFICATION & COMPENSATION OFFICE

FROM: _____ APPROVAL: _____
Name of Manager President/Vice Chancellor signature

I am requesting an Out-of-Class assignment for: _____ from _____ to _____
Name of employee beginning date ending date

This employee's current classification is _____.
Employee's present classification

This Out-of-Class assignment is a result of: (Choose 1 or 2 below. Then answer 3 and provide a brief summary below)

(1) A vacant position **OR** an employee's Leave of Absence. (# _____) (Assignment of _____)
Vacant position # Vacant positions classification
and _____
Absent/previous incumbent

(1a) Will the employee for this Out-of-Class assignment perform 50% or more of the duties of the vacated position? YES NO

OR

(2) Additional or reorganized work load where the duties appear to reflect _____
Classification of this assignment

(2a) Will the employee for this Out-of-Class assignment perform the 'Full Range of Duties' of a different classification? YES NO

(3) *Who* will share this work? Please list the Name(s) of other employee(s) and the % of duties performed from the vacant position.

A Brief summary:

ALTERNATIVES THAT HAVE BEEN CONSIDERED TO THE OUT-OF-CLASS (i.e. absorption of duties by a supervisor, dispersing duties to others, temporary transfer of personnel)

DUTIES TO BE PERFORMED NOT CURRENTLY IN EMPLOYEE'S CLASSIFICATION (itemize the additional duties that will be assigned)

SUMMARY OF THE EMPLOYEE'S QUALIFICATIONS TO DO THE JOB