

UPGRADE REQUEST FORM

Name: _____

Date: _____

Union: _____

Current Job Title: _____
(Attach job description)

Range/Step: _____

Hourly Rate: _____ **Annual Rate:** _____

Attach new job description, put line through duties no longer done and add in **BOLD** new duties.

I agree that the attached is an accurate description.

Supervisor

Title

Date

Department Head

Title

Date

Date received by Department Head (have it stamped in). I Department Head you respond in 30 days of above stamped date. I agree/disagree or have made changes to the attached job description and have sent it to Marci Nogueira.