

Form A – Employee Form
CUPE 2950
Job Reclassification Request

For Central HR use only:

HR Reference # _____

Contact Information:

| | |
|---|---|
| Employee Name: _____ Employee ID: _____ Employee Telephone: _____ Employee Email: _____ Department: _____ | Campus Mailing Address: |
| Manager Name: _____ Manager Title: _____ Manager Telephone: _____ Manager Email: _____ | Campus Mailing Address: |

Signatures:

| | |
|-----------------------------|-------------|
| Employee's Signature: _____ | Date: _____ |
| Manager's Signature: _____ | Date: _____ |

Please ensure that **signatures have been completed** before sending to:

Total Compensation Unit
Human Resources
#600 – 6190 Agronomy Road
Technology Enterprise Facility 3
Vancouver, BC V6T 1Z3

A copy of your Job Reclassification Request will be sent to the CUPE 2950 office. Please retain a copy of your completed Job Reclassification Request Form A on your files.

¹ CUPE 2950 benchmarks are located at: <https://hr.ubc.ca/working-ubc/staff-salaries-job-evaluation/staff-job-families/cupe-2950-benchmarks>.

Rationale for CUPE 2950 Job Reclassification Request

Instructions

1. The employee should complete this form (Form A).
2. The manager should review the form, sign page 1, and initial page 2. Signing and initialling the form only indicates that the form has been reviewed. It does not necessarily indicate that the manager is in agreement with the job reclassification request.
3. Please attach an updated job description and organizational chart. If a job description is not available to you, please check here .
4. Your manager will be asked to complete Form B and to submit Form A, Form B and the updated job description to the Total Compensation unit in Human Resources at the address shown on page 1.

Current Benchmark: Jobcode # _____ Title: _____ or Unique Job # _____

Proposed Benchmark: Jobcode # _____ Title: _____ or No match

Has a job reclassification request or appeal been filed for this job before? Yes No

If you answered yes above, please indicate the date the previous job reclassification request or appeal was filed: _____

Rationale for Change

[1] Indicate how the responsibilities, skills, and/or knowledge required for your job have changed, warranting a change in your current classification.

[2] Indicate the date that the above change(s) took place: _____

| | |
|-----------------|----------------|
| Initials | |
| _____ | _____ |
| Employee | Manager |