



Staff Position Evaluation and Review Process Request Form

Supervisors should complete and sign this form for staff position evaluation and analysis review *and provide both the Position Description or, as applicable, the revised Position Description with tracked changes, and proposed organizational chart*. The final decision on position evaluation will be made by Human Resources in conjunction with the supervisor.

Request to Evaluate *New Position, Replacement Position, or Currently Filled Position?*

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Current Incumbent:

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Current Job Title:

Current Job Band:

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Proposed Job Title:

Proposed Job Band:

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Department:

Position Control Number (PCN):

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Supervisor Name:

Supervisor Title:

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Questions be Completed by Supervisor

Briefly explain if and/or how the position has changed and provide specific examples (please note that the Job Description should explain this information in detail):

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Describe any new or additional responsibilities assigned or changed (month/year). Please note that both the supervisor and the current incumbent should be involved in documenting the position content.

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Describe any responsibilities which will be discontinued, reduced due to efficiency, or re-assigned to other employees. When will/were these changes made?

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Are there potential budgetary impacts of this request? If so, please describe and note whether this has been discussed/reviewed with the appropriate Cabinet member.

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Additional comments (please add any additional pertinent information):

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Along with this form, I confirm submission of a Position Description with tracked changes and proposed organizational chart to the Assistant Director of Compensation Services (nbruno@skidmore.edu).

Supervisor's Signature:

Date:

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Cabinet Member's Signature:

Date:

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