This form is used when requesting a re-evaluation of an existing position because of required changes in job accountabilities, responsibilities, and supporting activities. Approval of a re-evaluation does not necessarily mean that a position’s grade will change.

**Instructions:**
- Supervisor/incumbent makes appropriate revisions to position description in on-line PD tool.
- Supervisor prints copy of revised PD and submits with completed *Position Re-Evaluation Request Form*.
- Supervisor completes Part A.
- Department Chair, Head, or Center/Institute Director reviews Part A and completes Part B.
- Dean, Director, AVP, or Vice Provost reviews Part A & B and completes Part C.
- President, Provost, Vice President, or direct report to the President completes Part D.
- Budget Office approval needed in Part E.

## Part A: To be completed by supervisor and submitted with revised PD to Department Chair, Head, or Center/Institute Director.

<table>
<thead>
<tr>
<th>Title of Position:</th>
<th>Current Grade:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department:</td>
<td></td>
</tr>
<tr>
<td>Current Incumbent: <em>(Indicate previous incumbent if currently vacant)</em></td>
<td>Position Number:</td>
</tr>
<tr>
<td>Supervisor Name and Title:</td>
<td></td>
</tr>
<tr>
<td>Date of most recent position evaluation and/or re-evaluation request:</td>
<td></td>
</tr>
</tbody>
</table>

**List the significant changes that may have an impact on this position’s classification:**

1. 

2. 

<table>
<thead>
<tr>
<th>Signature:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Print Name and Title:</td>
<td></td>
</tr>
</tbody>
</table>
Part B: To be completed by Department Chair, Head, or Center/Institute Director.
- Determine if changes are significant enough to impact the position’s grade (call HR for guidance)
- Determine if sufficient funds are available in departmental accounts if the re-evaluation results in a position upgrade or in-grade adjustment
- If approved, forward to Dean, Director, AVP, or Vice Provost
- If not approved, return to supervisor and forward copy to Human Resources.

Please check all boxes that apply:
- I concur that the significant changes listed above warrant a position reevaluation.
- I do not concur that the significant changes listed above warrant a position reevaluation.
- A departmental account has sufficient funds to cover the cost if a re-evaluation results in a salary adjustment.
- A departmental account does not have sufficient funds to cover the cost if a re-evaluation results in a salary adjustment.
- I do not anticipate the need for additional funds because:
  - The position is vacant
  - I expect a position downgrade
  - Other

Signature: ____________________________    Date: ____________________________

Print Name and Title: ____________________________

Part C: To be completed by Dean, Director, AVP, or Vice Provost.
- Review Parts A & B; determine if changes are significant enough to impact the position’s grade (call HR for guidance)
- Indicate funding source if re-evaluation results in a position upgrade or in-grade adjustment
- If approved, forward to President, Provost, Vice President, or direct report to the President, whichever is applicable
- If not approved, return to supervisor and forward copy to Human Resources.

Please check all boxes that apply:
- I concur that the significant changes listed above warrant a position reevaluation.
- I do not concur that the significant changes listed above warrant a position reevaluation.
- Any required funding will come from (please check one and supply account number):
  - Department (Account #__________________)
  - Vice President or Provost (Account #__________________)
  - Other (Account #__________________)
- I do not anticipate the need for additional funds because:
  - The position is vacant
  - I expect a position downgrade
  - Other

Signature: ____________________________    Date: ____________________________

Print Name and Title: ____________________________

Part D: To be completed by President, Provost, Vice President, or direct report to the President
- Indicate approval of request and concurrence of funding source
- If approved, forward to Human Resources
- If not approved, return to Dean, Director, AVP, or Vice Provost and forward copy to Human Resources.

Please check all boxes that apply:
- I concur that the significant changes listed above warrant a position re-evaluation.
- I do not concur that the significant changes listed above warrant a position re-evaluation.
- I concur with the funding source identified in Part C.

Signature: ____________________________    Date: ____________________________

Print Name: ____________________________

Part E: Budget Office Approval:
- The budget identified above has sufficient funds for this evaluation.
- The budget identified above does not have sufficient funds for this evaluation.

Signature: ____________________________    Date: ____________________________

Print Name: ____________________________