



OVPR Classification and Equity Review Form

Information required from units for consideration of a reclassification or equity adjustment.

SECTION 1 – GENERAL INFORMATION	
Name and title of the person submitting this request:	
Employee name:	Current market title:
Current working title:	Current salary:
Reason for Request: (Select One)	<input type="checkbox"/> Reclassification <input type="checkbox"/> Equity Review
Is this a reclassification request that changes the incumbent from "non-exempt" to "exempt" status?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
SECTION 2 – SALARY INFORMATION	
Please describe the reason why you believe that the current salary is inappropriate: (Please attach additional documents/pages to this request as needed and submit one PDF document.)	
If you have a target salary in mind, please indicate the suggested salary here:	
SECTION 3 – CLASSIFICATION INFORMATION	
If you are requesting a review of the position classification, please answer each of the following questions. If not, please skip to Section 4.	
Why do you believe the current classification is inappropriate? (Please attach additional documents/pages to this request as needed and submit one PDF document.)	
Indicate proposed classification, include title and job code if known. (Job classifications can be found on the career navigator webpage: http://careernavigator.umjobs.org)	
Are there other people within your unit or elsewhere at UM doing similar work? If so, please provide names and classifications.	
Please submit the most recent job description for this position that is reflective of its current duties and responsibilities. Assign an estimated percent effort to particular job duties or groups of related job duties. This information is important to the accurate evaluation of classification.	



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Please describe what has caused the change in duties for this position? (Please attach additional documents/pages to this request as needed and submit one PDF document.)

Is supervisory responsibility assigned to this position?

Yes

No

If yes to previous question, please provide the number of people supervised by the incumbent, the title of those being supervised and whether they are regular or temporary staff:

SECTION 4 – STRATEGIC STAFFING QUESTIONS

Why is it in the best interest of the unit to make this change in classification and/or salary? (Please attach additional documents/pages to this request as needed and submit one PDF document.)

Will this change create an inequity with any other positions within your unit?

Yes

No

If yes, how do you propose to reconcile this issue?

What is the source of funding to support any recommended change in salary?

Do you have budget approval from OVPR? Please attach documentation or identify the budget meeting when discussed or approved.

TO BE COMPLETED BY OVPR HR:

Approved New Market and/or Working Title:

Approved New Salary FTR:

Effective Date of New Title and/or Salary Rate:

HR Approval Signature:

Date: