

ANAHEIM UNION HIGH SCHOOL DISTRICT

RECLASSIFICATION REQUEST QUESTIONNAIRE

Name: Click here to enter name.	Date: Click here to enter date.
Current Classification: Click here to enter current classification.	Proposed Classification: Click here to enter proposed classification.
Length of Time in Current Classification: Click here to enter length of time.	Supervisor name and title: Click here to enter supervisor name and title.
Department/site: Click here to enter department/site.	Work phone number: Click here to enter work phone number.

Classification study outcomes: A classification study includes thoroughly researching, analyzing, determining and documenting, the responsibilities and duties related to a position and not a person. This can be a lengthy process so it is important that the information provided clearly explains your current situation. A classification study can result in: Reclassification, content updates on job description, a new classification, salary alignment, or no changes if the scope of duties were represented on the current job description.

EMPLOYEE'S MAIN CONCERNS

1. Please select all the statements that apply to your current situation.
 - I am performing tasks outside of my classification.
 - I have acquired supervisory/lead responsibilities.
 - I had to learn new systems and processes.
 - My compensation does not reflect the current market (Please support your claim by attaching comparable positions within a 20 mile radius of our district).
 - Other (please specify): Click here to specify.

ESSENTIAL FUNCTIONS: DUTIES AND RESPONSIBILITIES

2. The information you will provide next is the **most important** part of this questionnaire! Make sure you have read the **Reclassification Request Employee Guide** before starting this section.

IMPORTANT: ONLY LIST THE JOB FUNCTIONS (TASK/DUTY STATEMENTS) YOU PERFORM THAT ARE NOT REPRESENTED IN YOUR JOB DESCRIPTION.

ESSENTIAL JOB FUNCTIONS

Frequency:	1 = Daily	2 = Weekly	3 = Monthly	4 = Yearly
% of Daily Time:	1 = 1% to %15	2 = 16% to 39%	3 = 40% to 74%	4 = 75% to 100%
Consequence of Error (COE):	1 = Minor (Immediate coworkers will be impacted by error)	2 = Serious (Site/department will be impacted by error)	3 = Critical (Entire district will be impacted by error)	
How Long Performed:	1 = 0-6 months	2 = 6 months – 1yr.	3 = 1-2 yrs.	4 = 2 + yrs.

Essential Functions (Not already listed on your job description)		Frequency	% of Daily Time	COE	How Long Performed
1.	Click here to enter essential function.	1-4	1-4	1-3	1-4
2.	Click here to enter essential function.	1-4	1-4	1-3	1-4
3.	Click here to enter essential function.	1-4	1-4	1-3	1-4
4.	Click here to enter essential function.	1-4	1-4	1-3	1-4
5.	Click here to enter essential function.	1-4	1-4	1-3	1-4
6.	Click here to enter essential function.	1-4	1-4	1-3	1-4
7.	Click here to enter essential function.	1-4	1-4	1-3	1-4
8.	Click here to enter essential function.	1-4	1-4	1-3	1-4
9.	Click here to enter essential function.	1-4	1-4	1-3	1-4
10.	Click here to enter essential function.	1-4	1-4	1-3	1-4

If you need more space, attach additional pages.

EMPLOYEE CONTACTS

3. **Internal Contacts:** List persons within the organization, other than your direct supervisor and any direct subordinates, with whom you have regular contact while performing the duties of your position. Briefly describe the purpose for these contacts and the frequency (e.g. daily, weekly, monthly, yearly) of their occurrence.

Contact	Purpose	Frequency
Enter Contact.	Click here to enter purpose.	1-4
Enter contact.	Click here to enter purpose.	1-4
Enter contact.	Click here to enter purpose.	1-4

4. **External Contacts:** List any contacts you regularly make with persons who are external to the organization while performing duties of your position. Briefly describe the purpose for these contacts and the frequency (e.g. daily, weekly, monthly, yearly) of their occurrence.

Contact	Purpose	Frequency
Enter contact.	Click here to enter purpose.	1-4
Enter contact.	Click here to enter purpose.	1-4
Enter contact.	Click here to enter purpose.	1-4

SUPERVISION / DIRECTION

5. **Supervision/direction received:** Please select one type and amount of supervision that best describes the type and amount of supervision that your position receives.

- My supervisor frequently checks my job activities.
- I work alone on routine or regular work assignments and check with my supervisor on no-routine assignments or when in doubt as to the correct procedure to follow.
- I receive occasional supervision while working toward a definite objective that requires use of a wide range of procedures. I plan, and/or determine specific procedures or equipment required to meet assigned objectives and I solve non-routine problems.
- I work from broad policies and toward general objectives. I refer specific matters to superior(s) only when interpretation or clarification of organizational policies is necessary.
- I work from general directives or broadly defined mission of the organization.

6. **Supervision/direction given:** Do you directly supervise employees (including conducting performance evaluations)?

Yes **No** If so, how many Enter text.

7. **Supervision/direction given:** Do you “lead” employees?

Yes **No** If so, how many Enter text.

8. **What type of supervision/lead do you provide?** Please select all of the supervisory/lead duties you perform, the level of your authority, and indicate whether you perform this activity for employees, non-employees (e.g. parents, students, volunteers, etc.), or both.

Duty	No Authority	Recommend	With Prior Approval	On Own Authority	Employee or Non-employee
Informally trains others (guides or demonstrates)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-3
Formally trains others (prepares content and teaches using engaging activities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-3
Assists in hiring employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-3
Assigns and monitors work for others on specific projects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-3
Assigns and monitors work for others on a daily basis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-3
Establishes rules, procedures, and standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-3
Approves overtime and/or leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-3
Evaluates performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-3
Takes corrective action	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-3

EMPLOYEE STATEMENT CONCLUSION

9. If there are other aspects of your job not covered in this questionnaire that are important in understanding your job duties and responsibilities please describe below.

Click here to enter a description of other aspects of your job.

Click here to enter name.

Click here to enter date.

Employee signature

Date

By entering name above, I certify all information is true and correct to the best of my knowledge.