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REQUEST FOR SHORT TERM OUT-OF-CLASS ASSIGNMENT

DATE: _____
 TO: CLASSIFIED PERSONNEL ADMINISTRATOR
 FROM: _____

In accordance with Personnel Commission Rules 30.200.7 and 70.300.6, employees required, and directed, by their immediate supervisor to perform higher level duties inconsistent with their regularly assigned duties. for any period of time which exceeds five working days within a 15-calendar day period, the employee shall be compensated for each day so worked at the salary step of the higher classification, in which they are working, that represents an increase of at least _____ percent.

I am requesting that _____, Current Classification _____, receive out-of-class pay while: working in the place of _____ working in a vacant position, as a(n): _____ at _____ (site). This out-of-class assignment will begin on _____ and stop at the end of the work day on _____. If the dates are not consecutive, list the specific dates involved: _____

_____ THIS OUT-OF-CLASS IS IN COMBINATION WITH THE INDIVIDUAL'S REGULAR ASSIGNMENT.
 x DURING THE TIME OF OUT-OF-CLASS, THIS INDIVIDUAL WILL WORK _____ B B B B HRS. PER DAY OUT-OF-CLASS AND _____ HRS. PER DAY AT THEIR REGULAR ASSIGNMENT.

_____ THIS OUT-OF-CLASS ASSIGNMENT WILL BE THEIR ONLY ASSIGNMENT DURING THE SPECIFIED PERIOD.
 x DURING THE TIME OF OUT-OF-CLASS, THIS INDIVIDUAL WILL WORK _____ B B B B HRS. PER DAY IN THE OUT-OF-CLASS ASSIGNMENT.

 REASON FOR OUT -OF-CLASS ASSIGNMENT (provide a brief summary of need, including the duties outside their regularly assigned duties they will be performing) _____

Supervisor's Signature _____ Date _____

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Social Security No. _____ Compensated at Range _____, Step _____ for the out-of-class hours, including longevity (if applicable).

AUTHORIZED BY: _____ DATE: _____
 CLASSIFIED PERSONNEL ADMINISTRATOR

FOR PAYROLL USE ONLY:

____/____/____ - \$ _____
 OOC pay range Hourly rate
 _____ Posit# _____ Date _____ # days x # hrs = _____ total hrs x _____ Hourly adj
 ____/____/____ \$ _____