

Form A – Employee Form
CUPE 2950 Employee-Initiated
Job Reclassification Request

For Central HR use only:

HR Reference # _____

Contact Information:

Employee Name: _____	Campus Mailing Address: _____ _____ _____ Campus Mail Zone: _____
Employee ID: _____	
Employee Telephone: _____	
Employee Email: _____	
Department: _____	
Manager Name: _____	Campus Mailing Address: _____ _____ _____ Campus Mail Zone: _____
Manager Title: _____	
Manager Telephone: _____	
Manager Email: _____	

Signatures:

Employee's Signature: _____	Date: _____
Manager's Signature: _____	Date: _____

Please ensure that **signatures have been completed** before sending to:

Total Compensation Unit
 Human Resources
 #350 – 2075 Wesbrook Mall
 General Services Administration Building
 Campus Mail Zone 1

Human Resources will forward a copy of your Job Reclassification Request to the CUPE 2950 office. Please retain a copy of your completed Job Reclassification Request Form A on your files.

¹ CUPE 2950 benchmarks are located at: http://www.hr.ubc.ca/comp/job_evaluation/families/2950.html.

