POSITION TITLE CHANGE REQUEST

Employee Name_____________________________________________________

Department ___________________________ Date _______________________

Current Title of Position ______________________________________________

New Title of Position ________________________________________________

In space provided below, explain in one or two sentences the purpose for the title change:

Please check all that apply.

Position has changed from:  ☐ Full time to Part time; ☐ Part time to full time
☐ Exempt to non-exempt  ☐ Non-exempt to exempt

Position is:  ☐ Temporary
☐ New
☐ Existing

Starting date of new title _________________________________

**If this title change includes a pay change, see Compensation Change Request Form.**

Requested by: _________________________________ Date ________________

Departmental Vice President Signature __________________ Date __________

Director of Human Resources Signature __________________ Date __________

PLEASE RETURN COMPLETED FORM TO LINDSEY WERTZ, HUMAN RESOURCES

Revised 03/07