



COUNTY OF HUMBOLDT

HUMAN RESOURCES

825 5th Street, Eureka, CA 95501

Personnel Services (Suite 100) Main Line: (707) 476-2349

Risk Management Services (Suite 131) Main Line: (707) 268-3669

DEI & Organizational Development (Suite 131) Main Line: (707) 476-2423

CLASSIFICATION AND ALLOCATION REQUEST FORM

This form, along with an organizational chart showing where this position would reside in the department's current organizational structure, is **required** to initiate a request for the following circumstances (check one):

Allocating an additional position when a job classification currently exists within the current county Classification System. A Position Description Questionnaire (PDQ) may be required to identify an appropriate classification for the new allocation.

Proposed Classification: _____

Reallocating an existing position (with no incumbent) when a job classification currently exists within the current county Classification System. A Position Description Questionnaire (PDQ) may be required to identify an appropriate classification for the reallocation.

Proposed Classification: _____

Development of a new job classification. A Position Description Questionnaire (PDQ) will be required before any new job classification can be developed.

Proposed Classification: _____

Reclassification of an existing position (with an incumbent). A Position Description Questionnaire (PDQ) will be required before any reclassification can occur.

Proposed Classification & Incumbent: _____

For a reclassification request, can the duties that you believe are outside of incumbent's current job scope be reassigned or removed?

Yes

No

If no, please provide justification below:

All requests will be reviewed and approved by Human Resources and the County Administrative Office. Budgetary impacts, priority of need, and statutory requirements related to the request will be a factor in approval.

Send this completed form, a department organizational chart showing where this position would reside in the department’s current organizational structure, and any other relevant documentation to personnel@co.humboldt.ca.us.

Please provide the information below related to the requested position.

Department:	Division/Unit/Location:	
How will the position be funded? (i.e., deallocation, increased revenue, eliminating OT/XH, etc....)		
Fund:	Budget Unit:	
Position status (check one):		
Regular	Grant/Limited Duration	Other
If “Grant/Limited Duration”, what is the duration?		
FTE of New Position		
Name and classification of supervisor over requested position:		
Name and classification of any other employee in the department currently performing the same, or similar, duties:		
Number of and titles of employees supervised by the requested position:		
Anticipated start date:		
Explanation/justification for request:		

Explanation/justification for request continued:

List the anticipated primary duties of this position:

List the following, if applicable:

- 1. Any required certification(s) or licensure**

- 2. Justification for the required certification(s) or licensure**

- 3. The issuing regulatory agency that would be associated.**

Additional Information:

Department Head Signature:

Date:

Department Contact Person:

Department Contact Phone #:

Department Contact Email:

For Human Resources Use Only

Human Resources notes/analysis/basis of determination:

Recommended Classification for Allocation:

Human Resources Signature:

Date: