

Prepared by: _____ Date: _____ Extension: _____

Select the reason for this request: *(A Position Review Form does not need to be completed for temporary positions and replacement positions in which there are no changes in responsibility.)*

Job Reclassification Replacement Position Promotion New Position Other

Section A: General information

Department: _____ Employee Name: _____

Current Position: _____ Current Salary: _____

Current Grade: _____ Proposed Position: _____

Section B: Statement of Request and Documentation

Provide justification and your goals for the outcome. Include a recommended increase if applicable.

Highlight changes from the existing position to the new position; explain the scope and the impact of these changes.

List any comparable position or positions with similar scope and accountability within and/or outside of your department.

Please send this form to echin@brandeis.edu in HR/Compensation with a Job Profile and organization chart of your area. She will be glad to assist or answer questions.