

DEMOTION REQUEST

List Placement Department Hire

A completed County Employment Application or Resume must accompany this form.*

*Except for departmen classification. <i>Must print in Black o</i>		ation list or in cases where th	e employee previously held a	active s	status in the lower level
Employee ID	Rcd No.	Last Name, First Name			
Phone No.			Email Address		
		Current Job Co	ode Title		
		List Placen	nent		
Job Code Title(s)			Previously Held Active Status in Job Code Title?		
			Yes	•	No -
			Yes ·	•	No -
			Yes		No -
		Department			
	Job Code Title		F	Positi	ion No.
status in the req Human Resourd ncluding dismis	juested Job Title(s ces. I understan	s), or the probationad that if I do serve ght to review or app	ry period is waived a probationary pe	in weriod	nless I have held active vriting by the Director of I, I may be disciplined onary period and do no
(The above doe	s not apply to emp	ployees with rights to	o return due to a pr	omo	tion.)
Employee Signature (Print & Sign)					Date
HR - E	nt & Sign)		Date		

This document/form incorporates use of e-signatures in accordance with the San Bernardino County Policy #03-12 and Standard Practice 1. DISTRIBUTION: Original – Employment-HR (0440)

Rev. 2/15/2024 (Demotion Request)