



CHECKLIST FOR PROMOTION OR RECLASSIFICATION

Must print in Black or Blue ink ONLY

Employee ID	Rcd No.	Last Name, First Name
Department		

PREREQUISITE FOR PROMOTION

[Manual PR– Include copy with packet](#)

Online PR

Note: Personnel Requisition (PR) must be completed and sent to Employment-Human Resources prior to completing this packet.

REQUIRED FOR PROMOTION

[Employment Status and Wage Notification](#)

[Teamster Member Only - New Hire Packet](#)

[Job Action Request \(JAR\)](#)

PREREQUISITE FOR RECLASSIFICATION

Civil Service Commission Memo
(approved by Human Resources Business Partner [HRBP])

REQUIRED FOR RECLASSIFICATION

[Employment Status and Wage Notification](#)

[Job Action Request \(JAR\)](#)

[Teamsters Member Only - Trust Plan Enrollment](#)

REQUIRED FOR PROMOTION OR RECLASSIFICATION (IF APPLICABLE)

[Advanced Step Placement Request*](#)

[Dual Appointment Agreement
Form 700](#)

[Automobile Election Agreement](#)

[Job Share Contract](#)

[Bilingual Forms](#)

[Trainee Promotion](#)

[Cell Phone/Portable Communication Device Allowance](#)

[Underfill Agreement](#)

[Medical Expense Reimbursement \(FSA\) Plan](#)

[Vision Plan Enrollment/Change Form](#)

[Enrollment](#)

Contact ebds@hr.sbcounty.gov to schedule Exempt Benefits Orientation**

[Other forms \(if applicable\)](#)

CEHW Clearance Date: _____

Incomplete Packets Will Be Returned