

CLASSIFICATION PROPOSAL REQUEST TRANSMITTAL

DPA-730 (NEW 07/06)



Requesting Department

Department Name: _____

Reason for Proposal (Check all that apply)

- New Program/Function
 Reorganization
 Technology Changes
 New MQs
 Terminology Update
 DPA/SPB Concerns
 Negotiated Agreement
 Other (describe): _____

Class Information

Impacted/Subject Class(es) <input type="checkbox"/> Check Here if Series	Schem Code/Class Code	Type of Change*	# of EES Impacted	CBID
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

* 1=New Class 2=Revision 3=Abolishment 4=Probationary Period Change 5=Alternate Range 6=Title Change
 7=Other (describe): _____

Funds

Does request require expenditure of unbudgeted or supplemental funds?

- Yes If yes, attach Form 137
 No If no, which form 137 statements were selected (Check all that apply): 1. 2. 3.

Are the subject classes used only by your department?

- Yes
 No *If No, provide the other user information requested below. All users must be contacted and listed below.*

Does Department:

Department	Agree	Disagree	Contact Person/Function	Phone
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Contact Information

Requesting Department's Program Contact Person: _____

Classification: _____ Phone: _____

Departmental Approval

	Signatures	Concept Date	Final Date
Department Analyst:	_____	_____	_____
Personnel Officer:	_____	_____	_____

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For DPA Use Only

DPA Analyst: _____ Date Concept Received: _____

Concept: Approved Denied Date: _____

Date Department Notified: _____ Date Final Proposal Received: _____

Projected SPB Meeting Date: _____