



# CLASSIFICATION APPEAL

## (Parts 1 and 2)

### (GOVERNMENT)

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### Instructions:

Please read the entire form carefully **before** completing the Classification Appeal Form.

**Please note: Employee qualifications, individual job performance, volume of work, or salary assigned to the grid range level are not valid grounds for an appeal.**

#### Part 1

1. Clause 28.3 of the Collective Agreement gives you the right to appeal the classification of the position you occupy. If you believe that the position you occupy has significantly changed or is improperly classified, please complete Part 1 to request an up-to-date job description/job profile and a meeting to discuss your job duties. **Include all information requested on the form.**
2. Submit a copy of Part 1 of the Classification Appeal form to your immediate supervisor and an electronic copy to the BC Public Service Agency (BCPSA) as per the bottom of this form.
3. Following receipt of the job description/job profile and the meeting, complete Part 1 "Outcome of Meeting".

#### Part 2

4. If agreement cannot be reached on the content of the job description/job profile or classification, or if you have not received your job description/job profile or had the requested meeting to discuss your classification, complete Part 2 within 30 days of receiving the job description/job profile or when the response was due (i.e., 30 days from Part 1). **You must complete Part 2 and file within 30 days or your Appeal will be deemed abandoned. Ensure the excluded supervisor's signature and date are completed when filing at Part 2.**

5. Complete Part 2 in full and forward to **Union Headquarters and BCPSA** as per Clause 28.3(c). Include your up-to-date job description/job profile and current organization chart signed by you, your supervisor and excluded supervisor.
6. The BCPSA will inform you of the on-site interview date. Please inform the Union if there are any changes to your position or any responses from the Employer. The BCPSA has 60 days to respond to your appeal as per Clause 28.3(d).
7. If there remains a dispute respecting the classification level, the Union will respond to the BCPSA within 60 days of receipt of the BCPSA's response at Clause 28.3(d) or when the response was due.

#### Notes

8. Please be aware that timelines are often extended by the Union/BCPSA in order to respond to appeals.
9. The effective date of any resulting change in classification level shall be the first day of the biweekly pay period following the date of receipt by the employee of the written job description/job profile or when the response was due as per Clause 28.3(a); i.e., the Part 2 date.

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#### **Union:**

E-mail : [ClassificationAppeals@bcgeu.ca](mailto:ClassificationAppeals@bcgeu.ca)

BCGEU Headquarters  
Classification Dept.  
4911 Canada Way  
Burnaby, BC V5G 3W3  
Fax: (604) 294-5092

#### **BC Public Service Agency (BCPSA):**

Ask MyHR: [www.gov.bc.ca/myhr/contact](http://www.gov.bc.ca/myhr/contact)

Submit an online service request (under 'Service' select 'Job Classification')

# CLASSIFICATION APPEAL

## (Parts 1 and 2)

### (GOVERNMENT)

**INSTRUCTIONS:**

- Please read the entire form carefully, including the instructions
- Attach additional sheets if more space is required
- Present Part 1 to supervisor to request job description / job profile
- Within 30 days file Part 2 as per Clause 28.3(c)

**PART 1 - INCUMBENT AND POSITION DATA**

EMPLOYEE NAME		HOME PHONE NO.	
HOME ADDRESS		E-MAIL ADDRESS	CELL PHONE NO.
MINISTRY		BRANCH	
SECTION		WORK PHONE NO.	FAX NO.
JOB WORKING TITLE		PRESENT CLASSIFICATION	POSITION NO.

I hereby request an updated job description/job profile and meeting to discuss my position's duties/responsibilities and attempt to resolve any discrepancies **(within 30 days)**

EMPLOYEE SIGNATURE	DATE REQUESTED Y   M   D ..... ..... .....	IMMEDIATE SUPERVISOR SIGNATURE
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OUTCOME OF MEETING

EXCLUDED SUPERVISOR SIGNATURE	PART 2 DATE Y   M   D ..... ..... .....	Note: The date the employee receives the requested job description/job profile, or the date the job description/job profile was due, determines the effective date of any subsequent reclassification.
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**PART 2 – REASONS FOR APPEAL (to be completed by applicant)**

*Note: Before you complete Part 2, please ensure the procedures contained in Clause 28.3 (a) and (b) have been exhausted. (See instructions.)*

1. Are there new and significant duties and responsibilities performed on a regular basis which have been added to your job description/job profile since it was last signed off or evaluated, and upon which your appeal is based? Describe each additional duty - attach additional sheets if needed.

2. (a) What date were these duties added?	Y   M   D ..... ..... .....	(c) Is this a new position? <input type="checkbox"/> YES <input type="checkbox"/> NO
(b) Where did the duties come from? (Indicate position, if known)		(d) Have you attached additional information? <input type="checkbox"/> YES <input type="checkbox"/> NO

3. If you believe that the position you occupy is improperly classified, list other classifications you consider to have duties and responsibilities which are directly comparable to your position. (include position and title).

4. What classification and grid level are you seeking based on the assigned duties and responsibilities?

**REFER TO INSTRUCTIONS ON PAGE 1**