

# Notice of New / Changed Job

**To:** Union Classification Department

**Cc:** CSSEA (fax 604-687-7266)

**Prepared by:** \_\_\_\_\_  
 (Name) (Title of person completing form)

**Email:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Date form completed:** \_\_\_\_\_

**Instructions:** To notify the union regarding the classification of a new job or change in duties of an existing job, please complete this form, attach the new / revised job description, and fax it to the applicable union (attn: classification department) and CSSEA. Keep the original for your records.

BCGEU: fax 604-294-5092 and email [Css.Classifications@bcgeu.ca](mailto:Css.Classifications@bcgeu.ca)  
 HEU: fax 604-739-1510

CUPE: fax 604-291-1194  
 HSA: fax 604-439-0976

Job Information		
Agency Name		Union
Job Description Title		Location / Program
Please check one:		
<input type="checkbox"/> New job	<input type="checkbox"/> Change in duties & classification of existing job Previous job title _____ Previous classification _____	<input type="checkbox"/> Change in duties of existing job
Effective Date of New / Changed Job		
Classification and Grid Level		
Classification (benchmark match OR point value rating from attached rating sheet for unique jobs)		
Grid Level	Wage Grid (check one): <input type="checkbox"/> Standard <input type="checkbox"/> Paraprofessional	Additional Remarks (optional)
Signature		Date