

APPENDIX E
REQUEST TO APPEAL CLASSIFICATION OF TRUST FUNDED POSITION

TO: Chief Personnel Officer _____
(Name and College)

FROM: _____
(Name and Title)

SUBJECT: Appeal of Trust Funded Position Classification

DATE: _____

I hereby appeal the classification of my trust funded position and request a classification audit and evaluation in order to determine whether it is appropriately classified.

I am requesting that my position be changed:

From: _____
(Title and Job Grade)

To: _____
(Title and Job Grade)

Except for this form, the employee should use all other forms/materials which are applicable to non trust funded (state) positions.