



# PASADENA CITY COLLEGE

Human Resources

## APPLICATION FOR SALARY CLASS CHANGE

*Due date: By last day of Spring or Fall Semester. Change effective date: First day of following semester*

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Date: \_\_\_\_\_

Division: \_\_\_\_\_

Change Requested from Class: \_\_\_\_\_ to Class: \_\_\_\_\_

**Please list the academic courses to be considered for a change of salary classification.**

I. Academic courses completed since last salary class placement, **SUBJECT TO VERIFICATION FROM OFFICIAL TRANSCRIPTS, which must be attached to this application.** Coursework previously taken may not be repeated for credit.

Name of Institution	Course Number	Course Title	Date Completed	Unit Value	
				Quarter	Semester

II. **NEW** academic degree received (to be verified by official transcripts)

Degree: \_\_\_\_\_ Institution: \_\_\_\_\_ Date Received: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

### ACTION TAKEN BY HUMAN RESOURCES

	Units
Previously Granted Units	
Class Change Units Granted	
Totals	

TOTAL UNITS: \_\_\_\_\_ AS OF (DATE): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Human Resources Technician

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Vice President, Instruction