REQUEST FOR REVIEW OF A LOCAL 743, IBT POSITION

PURPOSE: Under Article 19, Section 19.1 of the Teamsters, Local 743 Agreement, the Union may request the review of L743 positions provided there is a clear demonstration of substantial changes in job duties. The completion and submission of the form initiates the process for review.

INSTRUCTIONS: Review the entire form before answering the questions. The information written on this form should reflect the nature of the position at the present time, without regard to employee performance or possible future changes in the job. Follow the requirements below:

1. Employee/Union: Complete the Employee/Union Review section, obtain signatures from the employee and Union Staff Representative and submit form to Supervisor.

2. Supervisor and HR: Review the employee’s statements, complete the Supervisor/HR Review section, attach old job description and sign form. Submit form to Union Staff Representative.

3. Union Staff Representative: Submit to Human Resources Compensation (compensation@uchicago.edu) and Employee and Labor Relations (elrelations@uchicago.edu).

EMPLOYEE INFORMATION

<table>
<thead>
<tr>
<th>Employee Name:</th>
<th>Employee Email:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department/Unit Name/Number:</td>
<td>Date of Request:</td>
</tr>
<tr>
<td>HR Job Classification:</td>
<td>HR Job Code:</td>
</tr>
<tr>
<td>Supervisor Name:</td>
<td>Supervisor Email:</td>
</tr>
</tbody>
</table>

EMPLOYEE/UNION REVIEW Complete the following sections.

JOB SUMMARY: In a few sentences, briefly describe the primary function and purpose of the job.

Employee/Union:
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DESCRIPTION OF DUTIES: In a few sentences, describe the job duties performed on a regular, periodic, and occasional basis, in the order of importance. Place an asterisk (*) next to duties which are essential (must be performed in this position). Include the approximate percentage of time spent on each duty. The three sections below should total 100%.

<table>
<thead>
<tr>
<th>Employee/Union:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regular Duties (duties performed on a daily basis or almost every day):</td>
</tr>
<tr>
<td>%</td>
</tr>
<tr>
<td>Periodic Duties (duties performed regularly and at stated intervals – monthly, semi-annually, etc.):</td>
</tr>
<tr>
<td>%</td>
</tr>
<tr>
<td>Occasional Duties (duties performed as needed):</td>
</tr>
<tr>
<td>%</td>
</tr>
</tbody>
</table>

SCOPE: Indicate any factors that further describe the significance of the job (i.e., number of faculty and/or employees supported, number of events planned, size of budget, size of grants, amount of revenue generated, number and complexity of reports created, amount of cash/valuable supplies or equipment handled, dollar limits for purchasing authority, etc.).

| Employee/Union: |
REQUEST FOR REVIEW OF A LOCAL 743, IBT POSITION

IMPORTANT DECISIONS/JUDGMENTS: Provide two or three examples of the most important decisions or judgments made by a person in this job.

Employee/Union:

COMPUTER SOFTWARE: Provide a list of computer software used by a person in this job.

Employee/Union:

CONTACTS: List examples of individuals with whom an employee in this job has regular contact and for what purpose the contact is made.

Employee/Union:

<table>
<thead>
<tr>
<th>Contact Name and Role</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

MOST/LEAST DIFFICULT: Please list the most difficult and least difficult parts of the job.

Employee/Union:

Most difficult parts of job
1.
2.
3.

Least difficult parts of job
1.
2.
3.
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WORKING CONDITIONS: Check all that apply.

Employee/Union:
☐ Standard office environment
☐ Laboratory environment
☐ Direct patient contact or clinical care setting
☐ Stockroom or warehouse
☐ Construction environment
☐ High dust, dirt, grease environment
☐ High noise environment
☐ Exposure to chemical agents
☐ Exposure to animals
☐ Exposure to human/primate tissue or other biological agents
☐ Outdoor exposure to weather
☐ Exposure to extreme temperature changes
☐ Exposure to moving machinery
☐ Operate vehicles/drive motorized equipment
☐ Requires protective devices
☐ Requires extensive safety training
☐ Irregular work schedule
☐ On-call responsibilities
☐ Extensive travel
☐ Other, please specify:

PHYSICAL EFFORT: Check all that apply.

Employee/Union:
☐ Ability to sit for short or extended time periods
☐ Ability to stand for short or extended time periods
☐ Ability to bend, crouch, or stoop
☐ Ability to extensively use computer
☐ Ability to make repetitive wrist, hand, or finger movements
☐ Ability to see, including color, depth perception, or clarity
☐ Ability to hear, including making fine discriminations in sound
☐ Ability to carry/lifts loads of up to 25 lbs.
☐ Ability to carry/lifts loads of 25 lbs. to 49 lbs.
☐ Ability to carry/lifts loads of 50 lbs. or more
☐ Ability to use tools requiring high dexterity
☐ Ability to climb ladders/scaffolds and maintain balance
☐ Ability to feel, including perceiving size, shape, temperature, or texture
☐ Other, please specify:

__________________________________________
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**JOB CHANGES:** Please indicate in detail how the position has changed or not changed. Please describe the changes in job duties and responsibilities by: providing concrete percentages of duties; listing out additional duties; describing changes in duties and/or scope, etc.

<table>
<thead>
<tr>
<th>Employee/Union:</th>
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SUPERVISOR/HR REVIEW  Complete the following sections.

JOB SUMMARY:  In a few sentences, briefly describe the primary function and purpose of the job.

Supervisor/HR:

DESCRIPTION OF DUTIES: In a few sentences, describe the job duties performed on a regular, periodic, and occasional basis, in the order of importance. Place an asterisk (*) next to duties which are essential (must be performed in this position). Include the percentage of time spent on each duty. The three sections below should total 100%.

Supervisor/HR:

Regular Duties (duties performed on a daily basis or almost every day):

%

Periodic Duties (duties performed regularly and at stated intervals – monthly, semi-annually, etc.):

%

Occasional Duties (duties performed as needed):

%
SCOPE: Indicate any factors that further describe the significance of the job (i.e., number of faculty and/or employees supported, number of events planned, size of budget, size of grants, amount of revenue generated, number and complexity of reports created, amount of cash/valuable supplies or equipment handled, dollar limits for purchasing authority, etc.).

IMPORTANT DECISIONS/JUDGMENTS: Provide two or three examples of the most important decisions or judgments made by a person in this job.

COMPUTER SOFTWARE: Provide a list of computer software used by a person in this job.

CONTACTS: List examples of individuals with whom an employee in this job has regular contact and for what purpose the contact is made.

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<td></td>
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<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### MOST/LEAST DIFFICULT:

Please list the most difficult and least difficult parts of the job.

**Supervisor/HR:**

<table>
<thead>
<tr>
<th>Most difficult parts of job</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>4.</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Least difficult parts of job</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4.</td>
<td></td>
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<tr>
<td>5.</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
</tr>
</tbody>
</table>

### QUALIFICATIONS:

Indicate any required or preferred education, experience, and/or knowledge, skills, and abilities.

**Supervisor/HR:**

<table>
<thead>
<tr>
<th>Required</th>
<th>Preferred</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td></td>
</tr>
<tr>
<td>Experience</td>
<td></td>
</tr>
<tr>
<td>Knowledge, Skills, and Abilities</td>
<td></td>
</tr>
</tbody>
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☐ Requires protective devices
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☐ Irregular work schedule
☐ On-call responsibilities
☐ Extensive travel
☐ Other, please specify: ________________________________________

PHYSICAL EFFORT: Check all that apply.

Supervisor/HR:

☐ Ability to sit for short or extended time periods
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<table>
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<tr>
<th>Supervisor/HR:</th>
<th></th>
</tr>
</thead>
</table>

SIGNATURES:

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Employee Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Union Representative</td>
<td>Union Representative Signature</td>
<td>Date</td>
</tr>
<tr>
<td>Supervisor Name</td>
<td>Supervisor Signature</td>
<td>Date</td>
</tr>
<tr>
<td>HR Contact Name</td>
<td>HR Contact Signature</td>
<td>Date</td>
</tr>
</tbody>
</table>