



Position Audit Request Form

Date: _____

Employee E#: _____

Employee Name: _____

A request for a position audit is being submitted for the following position:

Current Position #: _____

Current Position Title: _____

Current Position Classification: _____

Date in Position: _____

Audit Request Submitted By:

Employee Manager Vice President Human Resources

Signatures

The following section must be completed to assure that all stakeholders aware of this position audit request. *Signature does not indicate approval of position reclassification.*

Employee: _____ Date: _____

Dept Head/Supervisor: _____ Date: _____

Dean/Director/Chair: _____ Date: _____

Vice President: _____ Date: _____

To learn more about Eastern Illinois University's Position Audit Procedures visit:

[Position Audit Procedures](#)

HR Internal Use Only:

Date Received: _____ Received By: _____