#### PROCEDURES FOR REVIEW OF CLASS SPECIFICATION

An appeal/request-for-review may be submitted if you believe you are in the incorrect classification based on your current duties and responsibilities or other pertinent factors.

An individual's seniority, work performance, volume of work, pay grade or salary is not grounds for review.

# REVIEW STEPS:

#### **EMPLOYEE REVIEW:**

- 1. Complete the employee information as well as the Employee Comments section of Page 2. The Justification for Request section (page 4) of the form MUST also be completed. Provide rationale about why you believe you are misclassified, Describe all changes necessary to correctly classify your position, providing all information that you wish to be considered in this review. **Reasons for requested change(s) must be clearly explained.** You may also attach any additional documentation to the justification for request form.
- 2. The completed review form must be given to the Department Director / Elected Official **no later than March 23, 2018** or the deadline established by your Department Head or Elected Official.

#### **MANAGEMENT REVIEW:**

4. Department Director / Elected Official:

Indicate "agree" or "disagree". Include comments (use the Additional Management Comments section on page 5 if necessary), notify employee of departmental recommendation, and forward the request to Human Resources. All requests must be received no later than April 6, 2018. Please submit to contacthr@cobbcounty.org. Please note, the department will notify the employee if the appeal is not eligible.

#### **HUMAN RESOURCES REVIEW:**

5. Human Resources:

Include comments and forward all requests eligible for review to the Archer Company for final disposition. Please include any background information that will aide in our understanding of the circumstances surrounding this request. If the submitted request is not a valid issue for review, please respond by indicating, "not eligible for appeal" and provide the department with a written explanation of the reason for denial.

#### CONSULTANT'S FINAL REVIEW:

6. The Consultant will review information submitted by the County and determine whether a change is warranted.

#### COUNTY MANAGER'S FINAL REVIEW:

7. The County Manager will review all requests that were denied by the consultant and make the final decision for approval or denial.

### **CLASSIFICATION & COMPENSATION STUDY APPEAL/REVIEW FORM**

| EMPLOYEE NAME: Dawn Sm                                                                             | ith                                                                                                                                                                     | DEPT: Parks/Rec/KCB                                                                                                                                                                                                                            |  |  |  |
|----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| EMPLOYEE ID:                                                                                       | 035139                                                                                                                                                                  | CURRENT POSITION #: 2092                                                                                                                                                                                                                       |  |  |  |
|                                                                                                    |                                                                                                                                                                         | CURRENT TITLE: Recreation Specialist/Pro                                                                                                                                                                                                       |  |  |  |
| Part Time                                                                                          | Full Time                                                                                                                                                               |                                                                                                                                                                                                                                                |  |  |  |
|                                                                                                    | EMPLOYEE COMM                                                                                                                                                           | ENTS:                                                                                                                                                                                                                                          |  |  |  |
| What position are you requesting to be reclassified into based on current duties/responsibilities? |                                                                                                                                                                         |                                                                                                                                                                                                                                                |  |  |  |
| New Classification Title: Public Programs Coordinator 1                                            |                                                                                                                                                                         |                                                                                                                                                                                                                                                |  |  |  |
| Requested Change: *Please note: A justification form MUST also be                                  | attached                                                                                                                                                                |                                                                                                                                                                                                                                                |  |  |  |
| Recreation Program Coordin<br>the position primarily focuses<br>programs". Also, this positio      | nator 1. The title requested to be char<br>is on "environmental/recycling" program<br>in is heavily concentrated on litter previous in direct alignment and affiliation | ecialist position are aligned with the duties of the nged to is Public Programs Coordinator 1 since ms/activities/events and not "recreation and sport vention, beautification, recycling and a standards with Keep America Beautiful of which |  |  |  |
| Employee's Signature: Dawn Smit                                                                    | Digitally signed by Dawn Smith Date: 2018.03.22 18:09:03 -04'00'                                                                                                        | Date:                                                                                                                                                                                                                                          |  |  |  |
|                                                                                                    |                                                                                                                                                                         |                                                                                                                                                                                                                                                |  |  |  |
| DEPARTMENT COMMENTS:                                                                               |                                                                                                                                                                         |                                                                                                                                                                                                                                                |  |  |  |
| Department Management                                                                              |                                                                                                                                                                         |                                                                                                                                                                                                                                                |  |  |  |
| Agree O Disagree with employee's request                                                           |                                                                                                                                                                         |                                                                                                                                                                                                                                                |  |  |  |
| Reasons / Comments:                                                                                |                                                                                                                                                                         |                                                                                                                                                                                                                                                |  |  |  |
|                                                                                                    |                                                                                                                                                                         |                                                                                                                                                                                                                                                |  |  |  |
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|                                                                                                    |                                                                                                                                                                         |                                                                                                                                                                                                                                                |  |  |  |
| Agency Director/Dept. Head/Elected Official Signature:                                             |                                                                                                                                                                         | Date:                                                                                                                                                                                                                                          |  |  |  |

| HUMAN RESOURCES COMMENTS                                                  |                            |  |  |  |
|---------------------------------------------------------------------------|----------------------------|--|--|--|
| Regarding Review:                                                         |                            |  |  |  |
| Full Time: O Forwarded to Consultant O Not Eligible for Appeal            |                            |  |  |  |
| Part Time: O Approve ODeny                                                | _                          |  |  |  |
| Reason: O Seniority O Work Performance O Volume of Work O Salary Amount ( | No Questionnaire Submitted |  |  |  |
| Pay Grade:                                                                |                            |  |  |  |
| Reviewed by:                                                              |                            |  |  |  |
| Comments:                                                                 |                            |  |  |  |
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| CONSULTANT'S FINDINGS:                                                    |                            |  |  |  |
| Recommendation Regarding Review: Approve Deny                             |                            |  |  |  |
| Recommended Change (if any):                                              |                            |  |  |  |
| Comments:                                                                 |                            |  |  |  |
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| Consultant's Signature:                                                   | Date:                      |  |  |  |
|                                                                           |                            |  |  |  |
| COUNTY MANAGER REVIEW:                                                    |                            |  |  |  |
| Recommendation Regarding Review: Approve Deny                             |                            |  |  |  |
| Reason/Comments:                                                          |                            |  |  |  |
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| County Manager's Signature:                                               | Date:                      |  |  |  |

### **CLASSIFICATION & COMPENSATION STUDY APPEAL/REVIEW FORM**

| EMPLOYEE NAME: Dawn Smith |  | DEPT: Parks/Rec/KCB                          |
|---------------------------|--|----------------------------------------------|
| EMPLOYEE ID: 035139       |  | CURRENT POSITION #: 2092                     |
|                           |  | CURRENT TITLE: Recreation Specialist/Program |

## EMPLOYEE'S JUSTIFICATION FOR CHANGE REQUEST

| 1. Please give specific reasons as to why you think the changes you are requ                                                                                                                                                                                                    | esting are valid.   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| The description of duties that I perform day to day are aligned with the duties of the Recre                                                                                                                                                                                    | ation Program       |
| Coordinator 1.                                                                                                                                                                                                                                                                  |                     |
| his position requires attendance at all of the Keep Cobb Beautiful Board (KCB) meetings and                                                                                                                                                                                     |                     |
| along with attending the District Commissioner's town hall meetings. I communicate with Colommissioners, their staff, elected officials and the citizens that reside in their appointed district.                                                                               |                     |
| ommunity groups, neighborhood associations, businesses, schools, county employees, contra                                                                                                                                                                                       |                     |
| Event planning should be part of the minimum qualifications due to this position requiring co                                                                                                                                                                                   |                     |
| implementing community recycling events, household waste events, medication disposal even appreciation events, and board meetings.                                                                                                                                              | nts, and volunteer  |
| appresiation events, and board meetings.                                                                                                                                                                                                                                        |                     |
| am required to uphold the high standards of Keep American Beautiful by performing program nat provides litter prevention, beautification, recycling and environmental education to our loca clerical support should also be removed, it is more so the duties of the Program Le | l communities. The  |
|                                                                                                                                                                                                                                                                                 |                     |
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|                                                                                                                                                                                                                                                                                 |                     |
|                                                                                                                                                                                                                                                                                 |                     |
|                                                                                                                                                                                                                                                                                 |                     |
| 2. Which of your current duties/responsibilities are in this new classification?                                                                                                                                                                                                | ?                   |
| Supervises, directs and evaluates assigned staff, processing employee concerns/problems,                                                                                                                                                                                        |                     |
| oordinates daily work activities; organizes, prioritizes, and assigns work; creates and distribute<br>ensures adequate staffing for programs/activities/events; monitors status of work in progres                                                                              |                     |
| completed work; consults with assigned staff; assists with complex/problem situations; provided                                                                                                                                                                                 | vides technical     |
| expertise; trains staff in operational policies and procedures. Plans, implements, and coordinate                                                                                                                                                                               | ates recycling and  |
| environmental programs/activities/events for assigned facilities; develops program services                                                                                                                                                                                     |                     |
| schedules trainings, programs, events and activities; reserves facilities and schedules grounds                                                                                                                                                                                 |                     |
| and supervises staff and volunteers; provides information and direction as needed; process registrations; and manages programs/activities/events in accordance with local, state and feeders                                                                                    |                     |
| Assists in implementing established budget for program/event: monitors expenditures to ens                                                                                                                                                                                      | _                   |
| assists in obtaining and monitoring use of granted funds; maintains inventories of supplies/f                                                                                                                                                                                   |                     |
| availability of adequate supplies to complete work activities; prepares and submits purchase                                                                                                                                                                                    |                     |
| receives/distributes incoming supply shipments.                                                                                                                                                                                                                                 |                     |
| oordinates and performs public relations for recycling and environmental programs/events: p                                                                                                                                                                                     | rovides information |

### ADDITIONAL MANAGEMENT COMMENTS

| I agree with the request of reclassifying the current position tit              | led                                                                                                                              |
|---------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| "Recreation/Programmer Specialist" to a coordinator title, thou                 | igh the title more in line                                                                                                       |
| with the responsibilities and hierarchy for this position would to              | <del>oe "Public Programs /</del>                                                                                                 |
| Resiliency Coordinator" (versus the requested title of "Public F                | Programs Coordinator 1)                                                                                                          |
| for the following reasons:                                                      | -                                                                                                                                |
| 1. This position coordinates, tracks and gathers data all fur                   | nctions associated with                                                                                                          |
| Cobb County's environmental sustainability and resiliency initi                 |                                                                                                                                  |
| 2. This position has a 100% focus on coordinating "county                       | -wide" environmental                                                                                                             |
| programs and events (i.e. litter prevention, beautification, recyc              |                                                                                                                                  |
| education) with no duties or assignments associated with recre                  | eation or sports                                                                                                                 |
| programming.                                                                    |                                                                                                                                  |
| 3. This position prepares and/or assists in the preparation                     | of the marketing plans for                                                                                                       |
| the adopt-a-mile program, Great American Cleanup, Rivers Aliv                   | e Cleanup, Green School                                                                                                          |
| program, Dig 'n The Dirt program and Household Hazardous W                      | <del>/aste (HHW).</del>                                                                                                          |
| 4. This position is also responsible for coordinating and tra                   |                                                                                                                                  |
| volunteers annually in the "how-to" and related safety (mishap                  | prevention) associated                                                                                                           |
| with all KCB programs.                                                          |                                                                                                                                  |
| <ol><li>This position is the first line of contact for inquiries sent</li></ol> | to the KCB non-profit and                                                                                                        |
| the KCB unit of Cobb County P.A.R.K.S.                                          | Digitally signed by Dr. Jonathan A. Jenkins, DBA CSSBB, MSCA CSSBB, MSCA A. Jenkins, DBA CSSBB, MSCA A. Jenkins, DBA CSSBB, MSCA |
|                                                                                 | CSSBB, MSQA  MSQA, o=Cobb County Government, ou=P.A.R.K.S Solid Waste, email=Jonathan_Jenkins@CobbCounty.org, c=US               |
|                                                                                 | email=Juriaman:Jennins@CoddCodiny.org, U=0-                                                                                      |
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| Department Director / Elected Official Signature:                               | Date:                                                                                                                            |