UNBC UNIVERSITY OF NORTHERN BRITISH COLUMBIA

Request for Title Change/Review

Proposed Position Title: _____

Department: _____

Incumbent: _____ (Local: _____)

Supervisor: _____ (Local: _____)

Rationale for Title Change:

Director of Human Resources: ❑: Approved ❑: Propose Alternate

Alternate Recommendations:

Approved Outcome: Effective Date:

Supervisor: _____ Date:_____

Human Resources: _____ Date:_____

Dean/Director: _____ Date:_____