

ACCRETION OF DUTIES PROMOTION CERTIFICATION

File this form on the left side of the Official Personnel Folder with a copy of the position description.

Name of Employee: _____

I recommend the employee named above be promoted without competition. I certify that the following conditions are met:

The employee continues to perform the same basic functions of the position to which originally assigned.

The major duties of the former position are absorbed into the new higher-graded position (i.e., the new position is a "clear successor" to the former position).

The new duties could not be reasonably assigned to another individual in the immediate organizational unit.

The new position has no promotion potential.

No positions within the organizational unit were adversely affected by the creation of this position (i.e., the higher-graded duties were not removed from another existing position, which could have an adverse impact on that position's grade level).

The employee meets all qualifications and eligibility requirements (including time-in-grade requirements)

The new position does not involve reclassification from a non-supervisory position to a supervisory or leader position.

The new position does not involve reclassification from a one-grade interval to a two-grade interval series or across occupational series.

The new duties have been performed for at least six months (*designate date employee began performing new duties*)

Date: _____

The employee has demonstrated satisfactory performance of the higher level duties prior to consideration for this accretion of duties promotion.

Name of Supervisor: _____

Supervisor's Signature: _____

Date: _____