

THE CITY UNIVERSITY OF NEW YORK

HEO - LABOR-MANAGEMENT COMMITTEE WORKLOAD CONCERNS FOR HIGHER EDUCATION SERIES EMPLOYEES FORM

<u>WORKLOAD CONCERNS:</u> HEO Series employees who have workload concerns should submit this form to the <u>College Labor Designee</u>. College Labor Designee will forward the form and any attached documents to the Chair of the Labor-Management Committee for appropriate action.

Employee Data	College			
Name	CUNYfirst Empl. ID #			
Current Contract Title	Department			
CUNYfirst Functional Title	Work Phor	e		
Request for Workload Review	Date of first appointment to a HEO S	Series Title		
Documents submitted: ☐ Memorandum outlining workload concerns ☐ Job Description at time of appointment List any other documents submitted:	Date of appointment to current title			
Date of submission Signature				
For College Labor Designee only				
Date of submission to Labor-Management Committee				
Name of College Labor Designee	Signature			

HEO LABOR-MANAGEMENT COMMITTEE - WORKLOAD CONCERNS

Workload Review☐ Recommendation made to the President/Presi☐ Not recommended	ident's designee	Date of Meeting	
Comments, if any			
Name of Chair of the Labor Management Committee			
Signature	Date		

The Chair of the HEO-Labor Management Committee will provide the signed form to the College's Labor Designee and a copy of the form to the employee.