

**Department of Human Resources
Bargaining Unit Employees (Only)
Authorization for Temporary Working Out of Classification (WOOC) Status**

*This form must be: 1) completed by the supervisor 2) approved by the Head of the Department and 3) forwarded to Compensation in the Department of Human Resources for final authorization. WOOC authorization should be obtained **prior to the start of the effective pay period**. Approval for hourly employees will cause a WOOC electronic time card to be generated in Web Time Entry so that the time worked out of classification can be entered by the employee. Supervisors must certify that instances of WOOC are consistent with the collective bargaining agreement.*

NOTE: Bargaining unit employees performing duties of a higher classification in a non bargaining unit job, for a minimum of 1 day, will receive 5% above their base hourly rate.

Employee Information

Employee's Name:	Employee "U" ID Number:	Current Position Number:
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Employee's Current Job Title:	Current Hourly Rate
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Temporary Working Out of Classification Job Information & Justification

Working Out of Classification **Bargaining Unit Position #:** _____

WOOC Title:	WOOC Pay Rate:	WOOC Start Date:	WOOC End Date:
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Working Out of Classification **Non Bargaining Unit Position #:** _____

WOOC Title:	WOOC Pay Rate:	WOOC Start Date:	WOOC End Date:
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List specific details on work to be performed while working out of classification (*duties of the higher classification must be performed for a minimum of two (2) hours*):

Manager/Supervisor Certification

I certify that this employee will perform the duties of the higher classification as listed above.

_____ Supervisor	_____ Date	_____ Department Head	_____ Date
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Time Card Approver

_____ Approver's Name	_____ U ID #	_____ Approver's Title	_____ Date
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Employee Certification

I certify that I will perform the duties of the higher classification as listed above.

_____ Employee Name	_____ Date
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For Human Resource Use Only

_____ Date	_____ Reference Number	_____ Authorized Salary/Hourly Rate	_____ Compensation Authorization Signature
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Updated: June 2011