SAN BERNARDINO COMMUNITY COLLEGE DISTRICT

REQUEST FOR POSITION CHANGE FORM

Current Position:	,	Position Contro	l No. A291506	
Classification/Title Counselor			Percent of Full-Time	100
Budget Account No. 01 76 02	8207 0232 1283.0	0 6320		
Employee Name Debra Bogh			Soc. Sec. No.	
Position Type	Academic [Classified	Management	
Requested Position Change:				
Classification/Title Change(fo	llow the classification re	view process for classified	positions.)	
Academic Reassigned Time	Yes	No Ser	mester Fall	Spring
Percentage of Reassigned Time	%	Effe	ective Date	
Duty Days Yes No	From	Days To	_ ^{Days} (Attac	h New Calendar)
Other Assignment Change	Yes No	Effe	ective Date	
Location Yes	No From		To	
Budget Transfer X Yes	No	New Account No.	01 76 02 8207 0000 1	283.00 6320
Reason For Reassigned Time/Assig	ınment Change:			
Move 21.628% of Debra Bogh's salary	· ·			
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Vice President	Date	Pres	ident	Date
Authorization:				
Vice Chancellor Fiscal Services	Date	Vice Chancellor H	luman Resources	Date