

**THE CITY UNIVERSITY OF NEW YORK
HEO - LABOR-MANAGEMENT COMMITTEE
WORKLOAD CONCERNS FOR HIGHER EDUCATION SERIES EMPLOYEES FORM**

WORKLOAD CONCERNS: HEO Series employees who have workload concerns should submit this form to the College Labor Designee. 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 Phone

Request for Workload Review

Date of first appointment to a HEO Series Title

Documents submitted:

- Memorandum outlining workload concerns
- Job Description at time of appointment

Date of appointment to current title

List any other documents submitted:

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

Date of Meeting

Recommendation made to the President/President's designee

Not recommended

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.