LABORATORY TECHNICIAN
REQUEST FOR PROGRESSION

*NOTE: This request is to be used as a cover sheet/checklist for the progression packet after all requirements are met. Please retain a copy of the completed progression packet for your records.*

GENERAL INFORMATION:

Employee's Name: ___________________________ Phone Number: ________

Employee's date of hire with the City of Tulsa: __________

Employee's tenure in current position: ___________________________

Supervisor's Name: ___________________________ Phone Number: ________

Supervisor's Title: ___________________________ Length of time you have supervised employee: __________

Current Classification: (Please ✓ appropriate response)

☐ Water Laboratory Technician, ST-27  ☐ Water Laboratory Analyst, ST-31

NOTE: The following must be completed by attendance keeper.

Sick leave within the last 12 months: Usage ________ hours  Accrual ________ hours  LWOP ________ hours

Signature of person verifying attendance: ___________________________ Date: ___________

REQUEST: I would like to be reviewed for a proficiency/progression:

☐ Proficiency Increase ___________________________  ☐ Water Laboratory Analyst, ST-31

PROGRESSION CHECKLIST OF SUBMITTED DOCUMENTATION:

☐ Education (Official stamped copy of transcript(s))  ☐ Internal training certificates  ☐ Minimum years of experience

☐ Valid Oklahoma Class “D” Operator’s License  ☐ ODEQ License ___________________________

☐ Demonstrated Skill Proficiency (Analytical Testing Requirements) ___________________________ Mgr’s signature

☐ Copy of most current Performance Planning Review Record with “Proficient” rating on last final review and receives better than “Needs Improvement” evaluation as defined in the Laboratory Objective Performance Criteria section covering Laboratory Cross Training Requirements.

I have attached all the related documentation as stated in the Laboratory Technician Progression & Productivity Program Criterion Document and corresponding policies and procedures to be used to evaluate my request for proficiency/progression. I am performing the appropriate duties and responsibilities at a competent level, completed the appropriate coursework and have demonstrated an increase in productivity for the department due to the development of knowledge, skills and abilities.

Employee's Signature: ___________________________ Date: ___________

Supervisor's Signature: ___________________________ Date: ___________