

**COUNCIL ADMINISTRATIVE AIDE  
REQUEST FOR PROGRESSION**

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

**GENERAL INFORMATION:**

Employee's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Employee's Date of Hire: \_\_\_\_\_ Employee tenure in current position: \_\_\_\_\_ months **OR** \_\_\_\_\_ years

Employee's education level: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Length of time supervising employee: \_\_\_\_\_

Current Classification: (Please ✓ appropriate response)

- Council Administrative Aide I (CS-60)       Council Administrative Aide II (CS-64)

⇒ **NOTE:** The following must be completed by attendance keeper.

Leave within the last 12 months:    Sick Leave \_\_\_\_\_ hours      LWOP \_\_\_\_\_ hours      Sick Leave Accrual \_\_\_\_\_ hours

Signature of person verifying attendance: \_\_\_\_\_ Date: \_\_\_\_\_

**REQUEST:**

**I would like to be reviewed for the following:**

- Council Administrative Aide II (CS-64)       Council Administrative Aide III (CS-68)

**PROGRESSION CHECKLIST OF SUBMITTED DOCUMENTATION:**

- Education (official copy of transcript(s))
- Coursework (transcript(s))
- Internal Training certificates or some proof of attendance
- External Training certificates or some proof of attendance
- Demonstrated Skill Proficiency (Test Scores)
- Experience: \_\_\_\_\_ years in office administration; \_\_\_\_\_ years as Council Administrative Aide\_\_ with the City of Tulsa
- "Proficient" or better rating on last final review

*I have attached all the required documentation as stated in the City Council Administrative Aide Criterion Document and corresponding Policies and Procedures to be used to evaluate my request for progression. I am performing responsibilities above and beyond those required of my current classification and have completed the appropriate coursework, training, and certification for progression.*

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_