Office of the Lieutenant Governor (OLG)

Department of Culture, Recreation and Tourism (DCRT)

**CAREER PROGRESSION GROUP (CPG) CONSIDERATION FORM**

A Career Progression Group (CPG) is a pre-defined list of titles, typically within a job series that may be used to hire and reallocate employees for recruiting, training and retention purposes. The below listed employee occupies a classified position that participates in a CPG and is determined to be eligible for reallocation to the next level:

|  |  |
| --- | --- |
| **Employee Name:** |       |
| **Personnel #:** |       |
| **Department/Section:** |       |
| **Position #:** |       |
| **Current Job Title:** |       |
| **Requested Job Title:** |       |
| **Eligibility Date:** |       |

Upon consideration, the following action is deemed appropriate:

**[ ]  APPROVE Effective Date:**

(Effective date must be on/after the Eligibility Date noted above.)

I certify that this employee has met the required standards of work to support reallocation in a CPG based on a combination of experience, duty assignments, competencies and performance. I hereby recommend that this employee be granted an upward reallocation with pay to the next level in the CPG in accordance with Civil Service Rules.

**REQUIRED ATTACHMENTS: [ ]  Personnel Authorization Form (301)**

 **[ ]  Employee’s Application**

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*Supervisor’s signature Date*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Appointing Authority’s signature Date*

**[ ]  RECONSIDER To be reconsidered on (Date):**

I recommend this employee’s reallocation in a CPG be reconsidered on the above referenced date. The reasons are as follows:

[ ]  Improvement needed:

[ ]  Other:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Supervisor’s signature Date*

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*Appointing Authority’s signature Date*

|  |
| --- |
| **FOR HUMAN RESOURCES USE ONLY:** |
| **Verified Eligibility:** | **(a.) SF-3 allocated to requested job title?** | [ ]  Yes | [ ]  No |  | **(c.) Meets Min Quals** |  |
| **(b.) Successful or Exceptional PES Eval?** | [ ]  Yes | [ ]  No |  *Initials Date* |
|  | **Entered in LaGov HCM:** |  |
|  |  |  | *Initials Date* |