

REQUEST FOR EXTENSION OF PROBATIONARY PERIOD

To: Riverside County Human Resources Department

Date:

From: _____
Department Head

Department:

I am requesting that the _____ probationary period of the following employee be extended by 520 hours (approximately 3 months).
The employee's probationary period _____ been extended before.

Employee's Name:

Employee No.:

Classification Title:

Date of hire into current class:

Date of hire into current Dept:

Labor Unit:

Date current probationary period is to be completed:

(This form must be submitted to the Human Resources Dept. at least two pay periods prior to completion of the probationary period.)

Performance evaluation(s) _____ been completed on this employee.

(Attach a copy of all evaluations which have been given to the employee.)

Dept. Contact:

First and Last Name, Title

Phone:

Reason for Request (i.e., describe rare and extenuating circumstances; if additional space is needed to explain reasons for request, please include attachment with additional information)

Department Head/Designee Signature:

Type First and Last Name, Title

Signature

HUMAN RESOURCES DEPARTMENT ONLY

Human Resources Department Review:

Instructions to Department:

Instructions to Personnel/Payroll:

HR Director/Designee (Typed Name and Title)

Signature

Date