

PROBATIONARY PERIOD EXTENSION REQUEST

DGS OHR 321 (New 11/2020)

All probationary period extension requests, including the automatic extension, shall be in accordance with [California Code of Regulations Section 321](#). Supervisor shall complete the following to the best of their knowledge and send to their assigned Office of Human Resources' Classification and Pay Analyst via email. The Classification and Pay Analyst will complete section 4.

SECTION 1 - EMPLOYEE INFORMATION

EMPLOYEE FULL NAME	CLASSIFICATION	POSITION NUMBER	CBID
APPOINTMENT DATE	SCHEDULED PROBATION END DATE	LENGTH OF PROBATION (See CalHR Pay Scale)	

SECTION 2 - REASON FOR EXTENSION

An employee's probationary period may be extended if they have not met the required number of actual hours worked in the prescribed length of the probationary period as specified below:

- 840 hours, if serving a six-month probationary period; or
- 1260 hours, if serving a nine-month probationary period; or
- 1680 hours, if serving a one-year probationary period.

Specify the dates of absence and hours of work missed on each of those dates:

If employee has been out on approved/unapproved leave, is program currently working with the Return to Work Unit?

Yes No

Is the program currently working with the Constructive Intervention Unit for the employee's performance issues or progressive discipline?

Yes No

SECTION 3 - SUPERVISOR CERTIFICATION

By signing below, I am certifying the facts stated are accurate and true to the best of my knowledge.

SUPERVISOR FULL NAME	SUPERVISOR SIGNATURE	WORK PHONE NUMBER	DATE
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SECTION 4 - OFFICE OF HUMAN RESOURCES

REQUIRED NUMBER OF HOURS	ACTUAL HOURS WORKED	NUMBER OF HOURS REMAINING
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I have reviewed the request and recommend the probationary period extension be:

Approved Denied

Provide an explanation for the recommendation:

NEW PROBATION END DATE (if applicable)

DATE EXTENSION NOTICE SERVED TO EMPLOYEE

C&P ANALYST NAME

C&P ANALYST SIGNATURE

WORK PHONE NUMBER

DATE