

CRIME AND INTELLIGENCE ANALYST 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 packet for your records.

GENERAL INFORMATION: (Please Print)

Employee's Name: _____ Phone Number: _____

Employee's Date of Hire: _____ Date to Class _____ Employee's tenure in current position: _____

Supervisor's Name: _____ Phone Number: _____

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

Current Classification: (Please check appropriate response)

- Crime and Intelligence Analyst I (AT-32) Crime and Intelligence Analyst II (AT-36)
 Sr. Crime and Intelligence Analyst (AT-40)

NOTE: The following must be completed by attendance keeper.

Usage within the last 12 months: Sick Leave _____ hours LWOP _____ hours Sick Leave Accrual _____ hours

Signature of person verifying attendance: _____ Date: _____ Phone # _____

REQUEST: I would like to be reviewed for the following progression or proficiency increase:

- Crime and Intelligence Analyst I 1st Proficiency Increase Crime and Intelligence Analyst II
 Crime and Intelligence Analyst II 1st Proficiency Increase Sr. Crime and Intelligence Analyst
 Sr. Crime and Intelligence Analyst 1st Proficiency Increase

PROGRESSION CHECKLIST OF SUBMITTED DOCUMENTATION:

- Education (Official copy of transcript(s))
 Appropriate Certification(s) for specific progression
 Demonstrated Skill Proficiency (Work Authorization)
 Copy of valid Oklahoma Class "D" Driver License
 Sufficient ability to satisfy Job Complexity criteria (memo from supervisor)

I have attached all the required documentation as stated in the Crime and Intelligence Analyst Progression Criterion Document and corresponding policies and procedures to be used to evaluate my request for progression. I am performing the responsibilities required for my level and have completed the appropriate coursework, training, and certifications.

Employee's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____