

Classification Committee	
Facility:	_____
Program Assignment: W/R	_____ Maintenance _____
Security Level:	_____
Recommendations	_____
Comments:	_____

Approved/Disapproved	_____
	Signature of Committee Chairperson

RETENTION SCHEDULE: Upon completion, attachments 1 will be will be placed in the resident institutional file and retained according to the official retention schedule for that file.