STATE UNIVERSITIES CIVIL SERVICE SYSTEM

Sunnycrest Center 1717 Philo Road, Suite 24 Urbana, Illinois 61802-6099



James D. Montgomery

Merit Board Chair

Lewis T. (Tom) Morelock

Executive Director

TO:

Designated Employer Representatives/Human Resources Directors

Classification Personnel and Examination Personnel

FROM:

Lucinda M. Neitzel

Assistant Director, Operations and Audit Division

SUBJECT:

Meeting Notice of Specification/Examination for the Study Abroad Series

DATE:

February 9, 2015

Consistent with our transition to electronic testing options, the State Universities Civil Service System (System Office) is proposing the revision to the classification plan. This letter is to notify you of a meeting to review the Class Specification and to discuss the examination instrument for this classification series.

Current Class

Study Abroad Assistant Director/
*International Programs Specialist

Proposed Classes

Study Abroad Assistant Director/
*International Programs Specialist
Study Abroad Adviser

This proposal will be formally reviewed at a meeting to be conducted on **February 19 at 10:00 a.m.** You are invited to attend the meeting at the System Office or by Videoconference. We ask that each employer with the potential to utilize these classifications to please participate in this process. For onsite participation, examination information will be distributed upon arrival to the System Office. If you plan to participate via Videoconference, the necessary examination materials will be sent prior to the meeting. Please provide your IP address if you wish to participate in this fashion.

Please share this information as required, but keep in mind that the purpose of this meeting is to review the new class specification and topics related to a new proposed examination. It is intended to be a collaborative process. Be advised that all participants involved in classification/examination meetings are expected to participate in a professional manner. Disruptive comments or behavior from any participant will **not** be tolerated. Please contact Lucinda Neitzel at (217) 278-3150, Ext. 236, or by email at cindyn@sucss.illinois.gov if you need any additional information or clarification.

^{*}Alternate Title

Classification/Exami	nation Review:			
Meeting Date: Febr	uary 19, 2015 at 1	.0:00 a.m.		
University/Agency: _				
Please respond by Specification and Exc			agency plans to particip	oate in the Class
Please indicate which method of participation you will utilize below. (Videoconference or Physically Attending)				
If you plan to utilize	videoconference	for your participation,	please indicate your IP ad	ldress:
Name	Position	Department	E-mail Address	Method of Participation