

Classification Establishment Request

Unless otherwise stated, all fields below are required. If information has been omitted or is unclear, the form will be returned to the requesting agency for completion or modification. Agencies must complete and submit this form to DOHR before a classification can be created.

Agency		Division / Program Area	
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Proposed Classification Information

Class Title (30 Character Max)		Requested Effective Date	
Class Abbreviation (10 Character Max)		Reg/Temp Status (e.g., Preferred/Executive)	
Requested FLSA Status: •Non-exempt (Cash) •Exempt/NoFLSA (Comp) •Exempt/Executive (None)		Job Function (probation period)	
Pay Plan		Requested Salary Grade	
Salary Range	Minimum	Midpoint	Maximum
Does this class directly supervise? (Y/N)		Standard Hours	

FOR DOHR USE ONLY

Class Code		Job Family	
Salary Grade		Effective Date	
Manager Level		EEO/OCC Code	
FLSA Status and Justification			

List the proposed duties of the classification.

Classification Establishment Request

Provide the justification for this establishment (e.g., how it meets agency needs).

Provide justification for the requested salary grade. List comparable titles used in justification. How does this establishment fit within your organization?

If the requested Reg/Temp status is Executive, provide justification on how it meets DOHR Policy 12-067.

If this establishment is part of a series, list all classifications (including class code, official state title, and Salary Grade) within the series (including the proposed classification).

Class Code	Official State Title	Salary Grade

REQUIRED DOCUMENTS

- Current/Proposed Org Charts
- Reallocation/Upgrade Chart if Applicable
- Job analysis documentation as required (Draft Spec, SME Info Quest., SME approval)
- Executive Class Review template form

Classification Establishment Request

Required Signatures

Agency Human Resources Officer (Director)
(sign and date)

Agency Appointing Authority
(sign and date)

Commissioner, Department of Human Resources
(sign and date)