**Job Class Creation/Modification Request**

This form is to be used for Job Classes that are NOT under the jurisdiction of the State Human Resources (State HR). Complete this form to request the creation of a new Job Class or a revision/modification to an existing Job Class.

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| Request Initiated ByEnter text | AgencyEnter text |
| PhoneEnter text | EmailEnter text |
| **Create A New Job Class** |
| Effective DateEnter date | Agency Unique Class CodeEnter text |
| Agency Job Class TitleEnter text | Pay Scale/Grade TypeChoose an item. |
| Pay Scale/Grade AreaChoose an item.Other Enter text | Pay Scale/Grade GroupEnter text |
| EEO CodeChoose an item. | Is the Job Class forState Employee [ ]  Non-State Employee [ ]  |
| Overtime Eligible [ ] Overtime Exempt [ ]  | Workforce Indicator:Select Option |
| **Revise/Modify An Existing Job Class** |
| Effective Date Enter date |
| **Action** | **Current** | **New** |
| SAP Job Class Number | Enter text | (SAP Job Class Number does not change) |
| Agency Unique Class Code | Enter text | Enter text |
| Job Class Title | Enter text | Enter text |
| Pay Scale or Pay Grade | Enter text | Enter text |
| Job Class EEO Code | Enter text | Enter text |
| **Agency Designated HR Approving Authority** |
| Director’s/Designee’s Signature (required)Enter text | DateEnter date |

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| --- |
| **State HR Labor Relations Section Approval Required for State Patrol and Marine Division Changes** |
| Labor Relations Signature (required)Enter text | DateEnter date |

**Submit signed form to:** **classandcomp@ofm.wa.gov**