

# IT Professional Structure Consultation Request

Submit completed form to the State Human Resources Enterprise Classification, Compensation & HR Analytics Team at [classandcomp@ofm.wa.gov](mailto:classandcomp@ofm.wa.gov). For more information and resources go to the [HR Professional Portal](#).

## Position Information

Agency/HE Institution, Division, Unit:

HRMS Position Number (if applicable):

Internal Position Number:

Incumbent's Name (If filled):

Current Job Family, Level and Class Code:

Proposed Job Family, Level and Class Code:

Supervisor's/Manager's Name and Title:

Date Submitted:

ITPS Coordinator Name:

Submitted by (if different):

Email Address:

Phone Number:

Date of Position Description Used for Last Evaluation (if applicable):

## Select Criteria for Review or Re-Review

### Establishment

- Upload signed IT position description to the position record in IT Position Evaluation Tool.
- Attach an organization chart to the IT PD (do not embed org chart in the IT PD, must be a separate page).
- If position record not yet loaded in the tool, attach the signed IT PD and organization chart to this request.

### Reallocation:

Employee initiated

Employer initiated

- Upload signed IT position description to the position record in IT Position Evaluation Tool.
- Attach an organization chart to the IT PD (do not embed org chart in the IT PD, must be a separate page).

### OR

- Upload the IT Position Review Request in IT Position Evaluation Tool.
- Provide justification and describe in detail the changes made to the IT PD.