

# Washington Management Service (WMS) Review Request

This form is to be completed by position's supervisor/manager and submitted to the Appointing Authority or designee.

## Position Information

Agency/Division/Unit:

Position Number/Object Abbreviation:

Current Class Title:

Proposed Class Title:

Action (check one):

Establish

Inclusion of Existing WGS Position

PDF Update

Re-evaluation of Existing WMS Position

Position is Currently:

Vacant

Filled

Incumbent's Name (if filled position):

How does this position meet the definition of manager state in WAC 357-58-035? Check all that apply:

Formulates statewide policy or directs the work of an agency or agency subdivision.

Administers one or more statewide policies or programs of an agency or agency subdivision.

Manages, administers, and controls a local branch office of an agency or an agency subdivision, including the physical, financial, or personnel resources.

Has substantial responsibility in personnel administration, legislative relations, public information, or the preparation and administration of budgets.

Functions above the first level of supervision and exercises authority that is not merely routine or clerical in nature and requires the consistent use of independent judgment.

Explain how this position meets the above definition(s) you checked. Provide examples:

Submitted by:

Date:

Attachment Checklist:

Completed WMS Position Description

Current organizational chart reflecting the position

## Appointing Authority Acknowledgement

Approved for review by the WMS Committee

Not approved for review by the WMS Committee

Comments:

If not approved, send a copy of this request to your WMS Coordinator.

Name and Title:

Signature:

Date:

*Please type your full name in the signature fields. Do not use E-sign features or insert signature images.*

Yes, a copy of this request was sent to WMS Coordinator.