

WORKING OUT OF CLASS

This form is to be completed if the duties and responsibilities have not been classified. Include a Position Description (CS-214) with this form.

AGENCY REQUEST					
Process Level & Department Name					
Requested Classification & Level					
Managerial Factors	FACTOR I	FACTOR II	TOTAL	LEVEL	
Specialist Type	<input type="checkbox"/> Staff Specialist <input type="checkbox"/> Program Specialist <input type="checkbox"/> Admin Assistant <input type="checkbox"/> Contract Specialist				
Factors	FACTOR I	FACTOR II	FACTOR III	TOTAL	LEVEL
Appointing Authority Comments					
Appointing Authority				Date	
CIVIL SERVICE APPROVAL					
Approved Classification & Level					
Managerial Factors	FACTOR I	FACTOR II	TOTAL	LEVEL	
Specialist Type	<input type="checkbox"/> Staff Specialist <input type="checkbox"/> Program Specialist <input type="checkbox"/> Admin Assistant <input type="checkbox"/> Contract Specialist				
Factors	FACTOR I	FACTOR II	FACTOR III	TOTAL	LEVEL
Civil Service Comments					
Civil Service Analyst				Date	
Manager				Date	

This WOC is valid for 26 pay periods from the Manager approval date.