

CS-1795 REV 4/2017		State of Michigan CIVIL SERVICE COMMISSION P.O. Box 30002, Lansing, Michigan 48909 EXECUTIVE OFFICE CLASSIFICATIONS, SPS AND UNCLASSIFIED POSITION ACTION REQUEST			CONTACT INFORMATION CSC Executive Office Class. Phone # 241-6605 CSC SPS Phone # 241-8552 CSC Compensation Phone # 284-0103	
FORWARD <i>Original to Civil Service</i> RETAIN <i>One Copy at Agency</i>		1. Process Level Name	2. Process Level Code	3. Bureau	4. Division	5. Dept. Code
6. Employee's Name (Last, First, M.I.)				7. Employee ID No.	8. Classified <input type="checkbox"/> SPS <input type="checkbox"/> Unclassified <input type="checkbox"/>	9. Direct Supervisor Code
10. Proposed HRMN Position Description				11. Bargaining Unit Code Y99 for Executive Class <input type="checkbox"/> Z88 for SPS <input type="checkbox"/> Z86 for Special Appointee <input type="checkbox"/>		12. Effective Date
13. <input type="checkbox"/> ESTABLISH <input type="checkbox"/> UPDATE <input type="checkbox"/> INACTIVATE/ACTIVATE <small>*Position description required for Executive Office classifications</small>			14. List All Subordinate Position Code(s) and Employee Name(s), if applicable. Attach additional sheets, if necessary.			
15. Appointing Authority's Comments						
16. Prepared By		17. Date	18. Phone Number Ext.		19. Signature of Appointing Authority	20. Date
SEND: EXECUTIVE OFFICE CLASSIFICATION ACTIONS TO CSC EXECUTIVE OFFICE SPS TO CSC PERSONAL SERVICES REVIEW UNCLASSIFIED TO CSC COMPENSATION						
POSITION ACTION RESPONSE — CIVIL SERVICE USE ONLY						
21. Date Received	22. Position Description		23. Position Code	24. Assign Link To Supv. Code		25. Effective Date
26. <input type="checkbox"/> ESTABLISH <input type="checkbox"/> INACTIVATE/ACTIVATE		27. Pay Schedule	28. Exempt <input type="checkbox"/> Yes <input type="checkbox"/> No		29. Pay Plan	
30. Civil Service's Statement						
31. Manager's Approval			32. Date	33. Entered By		34. Date

INSTRUCTIONS FOR COMPLETING CS-1795 POSITION ACTION REQUEST

BOXES 1 – 20 TO BE COMPLETED BY REQUESTING DEPARTMENT/AGENCY

- Box 1:** Enter the name of the department or agency for the position.
- Box 2:** Enter the 4-digit process level code for the position.
- Box 3:** Enter the name of the bureau for the position.
- Box 4:** Enter the name of the division for the position.
- Box 5:** Enter the 5-digit department code for the position.
- Box 6:** If the position is currently occupied, enter the full name of the employee. Do not enter nicknames.
- Box 7:** If the position is currently occupied, enter the employee's identification number.
- Box 8:** Indicate if the position is classified, SPS, or unclassified. Classified positions are the Executive Office classified. Unclassified positions are for special appointees.
- Box 9:** Enter the direct supervisory code for the position.
- Box 10:** Enter the proposed HRMN position description for the position. Executive Office classifieds are as described in the Compensation Plan.
- Box 11:** Check the appropriate bargaining unit code for the position.
- Box 12:** Enter the effective date for the position.
- Box 13:** Indicate if you are establishing a new position, updating a position, or inactivating or activating a position.
- Box 14:** If establishing a position with supervisory responsibilities, you MUST enter all subordinate position codes and names. ALL employees in the subordinate position code(s) will be attached to the supervisor's position.
- Box 15:** An appointing authority representative must enter the active CS-138# for an SPS position.
- Box 16:** Enter the name of the person preparing the Position Action Request.
- Box 17:** Enter the date the request was prepared.
- Box 18:** Phone number of person to contact with questions.
- Box 19:** Enter the signature of the designated appointing authority, whose name must be on file at Civil Service.
- Box 20:** Enter the date signed.

BOXES 21 – 34 TO BE COMPLETED BY CIVIL SERVICE

- Box 21:** Enter the date the request is received by Civil Service.
- Box 22:** Enter the approved position description including the classification and level.
- Box 23:** Enter the position code assigned to the position.
- Box 24:** If the position is supervisory, enter the link to supervisor code assigned.
- Box 25:** Enter the effective date for the approved position.
- Box 26:** Indicate the action approved by Civil Service for the position.
- Box 27:** Enter the pay schedule assigned to the position as found in the Compensation Plan.
- Box 28:** Indicate if the position is exempt and not eligible for overtime, or non-exempt and eligible for overtime, as described in the Compensation Plan.
- Box 29:** Enter the pay plan attached to the position as described in the Compensation Plan.
- Box 30:** Enter an explanation of Civil Service action taken on the position.
- Box 31:** Enter the name of the manager approving the request.
- Box 32:** Enter the date the request was approved by the manager.
- Box 33:** Enter the name of the personnel management assistant who entered the action into HRMN.
- Box 34:** Enter the date the action was entered into HRMN.