1. **ACTION INFORMATION**

Agency Name: Use the drop-downs to choose your Agency Name.

Action Type: The Type of Action you are requesting – what needs to happen with this position? If you need help identifying which action to use, contact your HR consultant.

Effective Date: The Effective Date of the position action.

1. **POSITION**

Job Class Title: Indicate the position’s Job Class Title.

Working Title: Indicate the position’s Working Title, if different than job class title.

8-Digit Position #: Indicate the 8-Digit Position Number this employee is assigned to.

4-Digit Position #: Indicate the position’s 4-Digit Position Number.

Job Class Code: Indicate the position’s Job Class Code.

Band/Range: Indicate the position’s Band or Range.

Union Representation: Indicate whether the employee’s position is represented by a bargaining unit. If the employee is part of a bargaining unit, select the union from the drop-down.

Position Information: Check all that applies to this position.

Use MyPortal: Indicate whether your agency uses MyPortal.

MyPortal Leave Approver: **If your agency uses MyPortal**, indicate whether this position is a MyPortal Leave Approver.

Supervisor: Indicate who will be supervising this position.

Management Type: **For WMS/EMS positions only:** Choose the position’s Management Type from the drop-down list.

Market Segment: **For WMS/EMS positions only:** Choose the position’s Market Segment from the drop-down list.

Primary Inclusion: **For WMS/EMS positions only:** Choose the position’s Primary Inclusion from the drop-down list.

Secondary Inclusion: **For WMS/EMS positions only:** If there is a Secondary Inclusion, choose from the drop-down list.

JVAC: **For WMS/EMS positions only:** Indicate the position’s JVAC Points (e.g., X2B589)

Position Evaluation Date: **For WMS/EMS positions only:** Indicate the date the position was last evaluated.

1. **WORK SCHEDULE**

Employment Percent: Indicate the percentage this position will be expected to work (e.g. 40 hrs/week = 100% or 20 hrs/week = 50%).

Salary/Hourly: Indicate if the position is salary or hourly.

Overtime Eligibility: Indicate if the position is overtime eligible or overtime exempt. If you need help making this determination, contact your HR consultant.

1. **RETIREMENT ELIGIBILITY**

New Position: If this is a new position, is this position eligible for retirement benefits based on the DRS requirements?

Established Position: If this is an established position, will this position remain eligible for retirement benefits based on the DRS requirements?

1. **ELIGIBILITY FOR FLEXTIME/TELEWORK**

Telework: Indicate if this position will be eligible to telework.

Flextime: Indicate if this position will be eligible for flextime.

Compressed Workweek: Indicate if this position will be eligible to work a compressed workweek.

1. **DUTY STATION**

Duty Station Address: Indicate the street address, city, and county where the primary work of this position is performed on a permanent basis.

1. **BUDGET INFORMATION** Complete all fields that apply. If unsure, work with your assigned budget analyst.
2. **ADDITIONAL INFORMATION:**

Additional Information: Use the Additional Information section to indicate any additional information necessary to process the action.

1. **AUTHORIZATION:**

Prepared By: Complete this section with every action. Indicate who completed the PPDS.

Approved By: Complete this section with every action. Indicate who approved the PPDS.