

City of Milwaukee – Department of Employee Relations
JOB CLASSIFICATION REQUEST FORM

Please fill out all form fields when applicable with a completed job description that is signed and dated
 (include a job analysis questionnaire, if applicable) and email to brwinte@milwaukee.gov.

Date	
Department	
Department Head	

Job Study Contact Information:

HR Contact	
Phone Number	
Email Address	
Supv/Mgr of Incumbent	
Phone Number	
Email Address	

Request Type (Check All That Apply):

<input type="checkbox"/>	Classification	To classify a new position authority as a result of the budget or grant funding
<input type="checkbox"/>	Designation	For example – bilingual, recruitment flexibility, task rate

Title/Position Information As It Is Listed In the Salary/Positions Ordinance:

Proposed Title	
Proposed Pay Range	
Division	
Section	
Number of Positions	

Duties and responsibilities:

Level of work as defined by knowledge, skill, mental or physical effort requirements, responsibility level, or working conditions:

Program, policy, or organizational changes that may impact the position and its responsibility level:

Documented recruitment or retention difficulties that may tie to this position:

Titles of other positions within the city that may be comparable to the position(s) to be classified:

Does this title already exist in your department? Please provide comparable JD along with new JD if so.

Any other relevant information:

Prepared by: _____

Approved by: _____