

## **Optional Pay Adjustment Questionnaire for Additional Duties**

Form Revision Date: 6/2021

Agency/Division:		Personnel Area Code:				
Requested Effective Date:		Please attach to LDH Form HR-22				
Requested Percent Adjustment:		Type of Adjustment:   Lump Sum  Base Pay				
1. Please provide emp	oloyee information below.					
Employee Name		J	Job Title			
Employee Personnel Number		F	Pay Level/Ra	ange		
Employee's Annual Salary	\$		Level of Wor Specification			
2. What are the additional duties?						
3. Has the job description been updated?						

4. Were any duties removed to facilitate this new duty? If so, which ones?	
5. Will the duties be permanent or temporary?	
6. What percentage of time are the additional duties allocated?	
7. Would you consider the duties to be lower, higher, or the same level as the duties performed in the current job?  This may include an assessment from the employee's manager. If a delegated agency, a HR assessment must be included.	
8. Does this result in some savings for the agency? If so, how? What are the projected dollar savings?	
9. Will the employee have to learn new skills and/or competencies? If so, please explain.	

10. Many jobs evolve over time, due to procedural differences and technology changes. How are these additional duties				
	different from a natural evolution of the job?			
	Example: Administrative Assistants have historically produced correspondence for their bosses. As recently as fifteen years ago, this was mostly done with a typewriter. Today, however, typewriters are essentially obsolete. An administrative assistant is still an administrative assistant, regardless of the method used to produce correspondence.			
	If this request is for an employee who is an administrator or higher, please describe how these duties are outside of the scope of the position.			
12.	Has the employee received an Optional Pay adjustment before? If so, please list dates and reasons.			