

This form must be completed for the following Requests for Personnel Action (RPA) and must be signed by the Office of Fiscal Services (OFS) prior to submitting an RPA to the Office of Human Resources (OHR):

- Requests to establish a new coded position\*
- Requests for a blanket position (i.e., 900 series serial number)
- Requests to reclassify a position to a higher salary
- Requests for positions with a maximum (max) salary above the Department of Finance (DOF) Threshold of \$12,359 or higher
  - Please note, if the max salary of either the "to" or the "from" class is above the DOF Threshold, the request requires DOF approval.

\*For coded positions established in a Budget Change Proposal (BCP), the [Request Change in Established Positions \(DGS OHR 25\)](#) can be submitted with an RPA in lieu of the DGS OHR 37. The DGS OHR 25 is developed and signed by OFS when the coded positions are approved through the BCP. OFS provides the signed DGS OHR 25 to the DGS program or contracted client agency, as well as the OHR’s Classification and Pay (C&P) Unit and the Personnel Transactions Unit (PTU). If the program or contracted client agency utilizes the OHR 37 for new coded positions established in the BCP, then the program or contracted client agency can reference the BCP number and fiscal year in Section 3.

This form is not required for backfills of previously established coded positions.

Instructions

Once you have completed Sections 1, 2, and 3, attach this form to an email and send to your [program’s OFS Budget Analyst](#) with a copy to the Budget Analyst’s Manager. Once it is returned and **signed by your [program’s OFS Budget Analyst](#)**, submit this form along with the other RPA documents to OHR’s Classification and Pay Unit.

Pay Differential

If this position is eligible for a [pay differential](#), which is defined as a special additional pay recognizing unusual competencies, circumstances, or working conditions, applying to some or all incumbents in select classification, then Section 2 must be completed.

Expiration

Please note, this form **expires 90 calendar days** after it is signed by OFS.

SECTION 1 – POSITION INFORMATION

RPA NUMBER	PROGRAM	REQUEST TYPE
CURRENT POSITION NUMBER	CURRENT CLASSIFICATION	DATE POSITION LAST VACANT
PROPOSED POSITION NUMBER	PROPOSED CLASSIFICATION	MAX SALARY OF PROPOSED CLASSIFICATION**

\*\* If the proposed classification has a max salary of \$12,359 or higher, the request requires DOF approval.

SECTION 2 – MISCELLANEOUS CHANGE/OTHER

Is this position eligible to receive pay differential?      YES      NO

If yes, identify and describe the applicable pay differential:

SECTION 3 – JUSTIFICATION

1. Describe the business need; include the nature of the request (e.g., promotion in place):

2. Describe the financial detail to demonstrate the program has sufficient funds to support the position:

3. Describe the work (i.e. duties) that will be performed by this position:

4. Describe the consequences if this request is not approved:

SECTION 4 - OFFICE OF FISCAL SERVICES

By signing below, I am certifying the program has sufficient funds to support the position.

DATE REQUEST RECEIVED	REQUEST APPROVED BY	TITLE	DATE
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