*A copy of the proposed policy and SER questionnaire should be submitted to the SCS Compensation Division at least two weeks prior to the requested effective date.*



**JOB AIDS AND RESOURCES
SER QUESTIONNAIRE**

*Revised 12/18/14*

|  |  |  |  |
| --- | --- | --- | --- |
| **Agency:** |       | **Personnel Area Code:** |      |
|  |  |  |  |  |  |
| **Requested Effective Date:** |       | **Request Type:**  | ☐ New☐ Amend | **Percent Into Range:** | ☐ Up to 1st Quartile |
|  |  |  |  |  | ☐ Above 1st Quartile - Midpoint |
|  |  |  |  |  | ☐ Above Midpoint – 3rd Quartile |
|  |  |  |  |  | ☐ Above 3rd Quartile |
|  |  |
| **Reason for the request:** |       |

|  |
| --- |
| 1. **Please list all job titles this request is being made for as well as all corresponding information encompassed by this SER. *Attach additional sheet if necessary.***
 |
| Job Title(s) | Job Code | Pay Level | Current Bi-weekly Amount | Requested Bi-weekly Amount | Number of Positions | # of incumbents below SER amount upon implementation |
| Filled  | Vacant |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| 1. **Do you plan on giving a corresponding adjustment for employees above the SER amount? If yes, what percentage or amount is being requested?** ☐ Yes Corresponding Adjustment Percentage or Amount:      ☐ No
 |
| 1. **Will this SER apply to all incumbents in the specified job title(s)? If not, please explain.**

      |
| 1. **Please provide your (voluntary) statistics for the previous 3 fiscal years for the affected job title(s).**

 ***NOTE: Voluntary turnover does not include retirements, promotions, demotions, etc. Attach additional sheet if necessary.*** |
|  | 20 | 20   | 20   | Where to? |
| **Job Title(s)** | # Incumbents | # Vol Sep | Turnover % | # Incumbents | # Vol Sep | Turnover % | # Incumbents | # Vol Sep | Turnover % | # to Private | # to State Agencies |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| 1. **Please provide applicant pool and recruitment data for the affected job title(s). Attach additional sheet if necessary.**
 |
| **Job Title(s)** | **Date of Postings** | **# of Postings** | **# of Applications** | **# Job Offers Made** | **# Job Offers Accepted** | **Salaries Requested** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **6. What attempts have you made to enhance recruiting (i.e. ads, job fairs, etc.)?**      |
| 1. **Please list all pay mechanisms already in effect for each job title.**

      |
| 1. **Please explain any other justification.**

      |

**PLEASE NOTE THAT THE AGENCY POLICY MUST BE ATTACHED TO THIS DOCUMENT.**