



Job Evaluation Request

****NOTE** - Required **THREE** attachments for complete Job Evaluation Request Package:

*** Job Evaluation Request form * Job Description * Organization Chart - ALL signed & dated by Deputy Head**

Job Evaluation Information

Required Section

Evaluation of	A NEW Position	An EXISTING Position (*select changes below)		An INTERN Position (New or Existing)
*Applicable Changes	New Duties Added Duties Removed	Clarification of Responsibilities JD Update (*select updates below)		
*JD Update Changes	Title Change Reporting Change	KSA or TAB Change Location Change	Wording Change Format Change	Dept. Code Change Other (*specify in comments below)
Comments	(Please attach separate page for additional comments)			
Prioritization Request				

Position Information (Only ONE Position # accepted per form)

Required Section

Position #	Position Title (30 Characters Maximum)			
Department	Dept. Code		Funding	
Reports to Position #	Location	Union		
Basic Info.				
Other Info.	Bilingual Required Confidential Position	Seasonal Position	Lieu Stat Bank	Stat Bank (16.09) (dd/mm/yy)
Effective Date	*Date Requested			
Deputy Head Signature _____		Date _____		

Job Eval Submission

Please send complete Job Evaluation Request Package to:

Headquarters - Hardcopy - Internal Mail to YK-6

Regions - Electronic Copy - job_evaluation@gov.nt.ca

For Job Evaluation Request inquiries please contact job_evaluation@gov.nt.ca

Job Evaluation Use Only