

# INTERIOR SAWMILL INDUSTRY JOB EVALUATION PROGRAM

## PLEASE READ BEFORE FILLING OUT THIS FORM

THIS REQUEST FORM MUST BE ACCOMPANIED BY A **JOB STUDY RECORD FORM** AND BOTH FORMS MUST BE SIGNED BY THE **UNION** AND THE **COMPANY** IN THE SPACES PROVIDED IN ORDER FOR THE INDUSTRY EVALUATORS TO PROCESS THE APPLICATION

### REQUEST FOR JOB EVALUATION

Name of company and division: \_\_\_\_\_

Present category title: \_\_\_\_\_

Present category grade: \_\_\_\_\_

Present category rate: \_\_\_\_\_

Name of applicant: \_\_\_\_\_

**The dates entered here will be used for the purpose of calculating retroactive pay in the event there is an increase in group and rate. If this is an application for a 5-year review, keep these fields blank.**

Change in Job Content - When did the change happen? \_\_\_\_\_

New Job - When was the new job created? \_\_\_\_\_

### BRIEF REASON FOR THE REQUEST

### FOR REVIEW COMMITTEE ONLY

Date request acted on: \_\_\_\_\_

If there is a dispute with this application, please provide a brief description of the dispute and forward to evaluators:

\_\_\_\_\_  
\_\_\_\_\_

PLANT JOB REVIEW COMMITTEE  
FOR USW

\_\_\_\_\_  
\_\_\_\_\_

PLANT JOB REVIEW COMMITTEE  
FOR MANAGEMENT

\_\_\_\_\_  
\_\_\_\_\_

(Signatures)