Special Compensation Plan for Information Technology Classifications Policy Memorandum
for FY 2011

TO: Elected Officials, Agency Directors, and Personnel Officers
State Government Agencies

FROM: Lynn Fitch
Executive Director

DATE: June 20, 2010

SUBJECT: ADMINISTRATIVE POLICIES AND PROCEDURES FOR THE SPECIAL
COMPENSATION PLAN FOR INFORMATION TECHNOLOGY
CLASSIFICATIONS FOR FISCAL YEAR 2011

A. STATEMENT OF PURPOSE

It is the intent of the Mississippi State Personnel Board to establish the Special Compensation
Plan for the purpose of attracting, retaining, and developing competent information technology
professionals to support the information technology business needs of the State of Mississippi.
The Plan shall provide methods for employment, promotion, and reassignment that are
responsive to organizational or program needs and that offer flexibility to appointing
authorities/governing bodies to negotiate, establish, and adjust salaries.

These provisions shall supersede all conflicting policies and procedures for the administration of
salaries published in the Mississippi State Personnel Board Policy and Procedures Manual and
any additional or replacement manuals, effective close of business June 30, 2010, and shall
become an official attachment to the Mississippi State Personnel Board Policy and Procedures
Manual for Fiscal Year 2011.

The statutory increase or decrease of any salary under the salary setting authority of the
Mississippi State Personnel Board shall comply with the policies below, except where the
Legislature may otherwise provide.

B. COVERAGE OF THESE POLICIES

These policies shall govern the special compensation plan for classifications within the State of
Mississippi Information Technology Career Path Chart (Attachment 3) and shall supplement the
Variable Compensation Plan. This plan is also open to those state agencies not under the purview
of the Mississippi State Personnel Board which voluntarily operate under limited provisions of
the Mississippi State Personnel Board.
C. GENERAL POLICY PROVISIONS

1. Designation Authority

The Mississippi State Personnel Board shall have exclusive authority to approve designated Special Compensation Plan positions. The Mississippi State Personnel Board will appoint, from a list of nominees submitted by the Executive Director of Information Technology Services, an Information Technology Professional Development Committee (ITPDC) to review information technology related degrees in regard to meeting classification minimum requirements and agency requests for reallocations and class establishments. The ITPDC will provide a recommendation for action to the Mississippi State Personnel Board. This committee shall act in an advisory capacity to the Mississippi State Personnel Board and is established pursuant to the statutory authority of the Mississippi State Personnel Board. The ITPDC shall be established by precept and members are appointed in accordance with the procedures in Attachment 1.

Rules for operation of the ITPDC will be published with the Secretary of State’s Office as Attachment 1 to this memorandum.

2. Adding Classifications to the Special Compensation Plan

Classifications shall be added to the Special Compensation Plan only upon prior approval by the Mississippi State Personnel Board with recommendation by the ITPDC.

3. Position Movement

Positions may be placed under the Information Technology Special Compensation Plan through the normal reallocation process. Requests for budgeted and non-budgeted reallocations and new positions shall be considered on a case-by-case basis by the Mississippi State Personnel Board with recommendation by the ITPDC. All requests for reallocation must be justified and submitted by the requesting agency as outlined in the Mississippi State Personnel Board Policy and Procedures Manual and Variable Compensation Plan Policy Memorandum for FY 2011 for approval by the Mississippi State Personnel Board or the Mississippi State Personnel Board Executive Director.

4. Educational Benchmarks

The appropriation language, as follows, suspends educational benchmarks for Fiscal Year 2011, with exceptions listed in Section D.10 of the Variable Compensation Plan for Fiscal Year 2011.

Unless otherwise authorized in this act, no state agency shall take any action
to promote or otherwise award salary increases through reallocation, reclassification, realignment, educational benchmark, career ladder, equity salary adjustment, or any other means to increase salaries of employees or positions unless specifically exempted by the following conditions: the award of teacher salary increments; the advancement of a trainee/cadet to the next level of a bona fide career ladder; the award of an educational benchmark for the attainment of a Certified Public Accountant License or higher level professional certification based on information provided to the State Personnel Board by the Legislative Budget Office; the immediate replacement of a departing employee with an employee from within state service at a salary level of the departing employee or the FY2011 promotional formula, whichever is less; the emergency appointment of nurses, pharmacists or other health care and child protection professionals at a salary to be determined by the State Personnel Board; or a new hire associated with the American Recovery and Reinvestment Act of 2009.

5. **Designation Policies**

Each appointing authority shall comply with the Mississippi State Personnel Board policies and administrative procedures, which govern the designation of positions and employees for inclusion in the Special Compensation Plan.

6. **Annual Policy Memorandum**

The Mississippi State Personnel Board shall publish annually a Special Compensation Plan Policy Memorandum, which addresses all policies and procedures to govern the Special Compensation Plan for that year.

7. **Assignment of Salaries**

The salaries assigned to positions in the Special Compensation Plan shall be fixed in accordance with the provisions of the Special Compensation Plan and the Variable Compensation Plan, unless otherwise provided by law.

8. **Provisions for Awarding Information Technology Special Compensation Plan Salary Increases**

The appropriation language, as included in Section C.4 of this policy, suspends special compensation plans for Fiscal Year 2011, with exception listed in Section D.11 of the Variable Compensation Plan for Fiscal Year 2011,

Salary increases for in-class movement under the Special Compensation Plan may be
awarded for achievement of educational objectives, the development of additional critical competencies, or evidence of increasing complexity of work goals. The Special Compensation Plan is intended to reward employees who have attained additional education and competencies, which directly add value to their ability to perform the duties and tasks of their positions, which ultimately add value to the agency. It is intended to be awarded individually to employees, similar to an Educational Benchmark, and is not intended to reflect any increase in the value of the classification.

a. General Policies

1) Requests for special compensation awards are made at the discretion of the agency head and are based on a twenty four (24) month measurement period. The measurement period begins upon completion of the Competencies/Education Profile form by the employee’s supervisor. The measurement period ends upon award of a special compensation salary increase. Another measurement period begins immediately after the award of a special compensation salary increase.

Employees are eligible for their initial special compensation award after a minimum of twelve (12) months evaluation in an IT Special Compensation Plan position, provided that he/she has remained in the same position and has not been promoted during the evaluation period.

The measurement period will start over upon promotion of the employee or upon a lateral or downward transfer to a different agency than the one in which the employee began the measurement period. Any prior education or training accomplished at the prior agency may be transferred to the new measurement period at the new agency. Certification of prior hours must be received from the employee’s former agency.

2) Employees who complete the requirements for a special compensation increase may be eligible for a salary increase of up to six percent (6%) of their current salary at the time they complete the requirements. A special compensation increase may be awarded up to twelve (12) months after the employee completes the requirements for a special compensation increase.

3) All special compensation awards must be accomplished from within funds available.

4) To be eligible for a special compensation award, the employee must have maintained a 2.0 or above rating in each essential duty/standard statement of the individual’s Performance Appraisal Rating review during the time period of the award.

5) A Competencies/Education Profile (CEP) form (Attachment 2) signed by the employee’s immediate supervisor and authorized by the agency head must be kept on file by the
agency for each special compensation increase.

b. Requirements for Eligibility

1) To be eligible for a special compensation increase an employee must complete at least one hundred twenty (120) contact hours of education/training. Sixty (60) of the contact hours must be from the listing of pre-approved categories for his/her classification as approved by the Mississippi State Personnel Board Executive Director and maintained by the Information Technology Professional Development Committee (ITPDC). The remaining sixty (60) hours may be as approved by the agency head. However, employees who receive a special compensation award for the initial twelve (12) month period, as discussed in paragraphs a(1) and a(2) above, must complete sixty (60) contact hours of education/training. Thirty (30) of the contact hours must be from the listing of pre-approved categories for his/her classification as approved by the Mississippi State Personnel Board Executive Director and maintained by the ITPDC. The remaining thirty (30) hours may be as approved by the agency head.

2) In addition to the education/training hours, an employee must receive a rating of Yes (Y) indicating added value accomplished by the employee for at least three of the competencies identified for that classification, indicating the employee has fully met the supervisor’s expectations relative to those competencies. Documentation supporting the added value must be maintained by the agency.

3) The employee must have maintained a meets expectations, (2.0) or above, in each essential duty/standard statement of the individual’s Performance Appraisal Review (PAR) rating during the measurement period.

c. Approved Education/Training

1) A listing of qualified education/training categories will be maintained by the Information Technology Professional Development Committee (ITPDC). Approved categories will be listed for each of the four (4) job families (Management, Infrastructure, Operations and Support, and Systems Delivery, see Attachment No. 2). Training hours from conferences must be documented in detail, reviewed, and approved by the agency head for consideration of training hours for special compensation.

2) Copies of course certificates or other documents specifying completion of education/training hours shall be maintained by the agency and shall accompany the Competencies/Education Profile (CEP) form. In the case of education/training which specifies a range of hours required for completion, the minimum number of hours specified will be used. In the case of conferences or general session type meetings where individual documents of completion are not distributed to participants/attendees, the
employee’s immediate supervisor must certify in letter format the number of hours claimed by the employee. The certification will be approved by the employee’s first level reviewer or the agency head. On the job training will not be counted as training for special compensation.

3) Education/training contact hours shall count only for the current measurement period. Hours achieved in excess of one hundred twenty (120) will not be carried over to future periods, nor will they be given additional weight or computation in the current measurement period. Once a special compensation award is made, the employee then begins the next measurement period with zero (0) contact hours.

d. Critical Competencies

1) A complete listing of critical competencies has been identified for each job classification. At the beginning of the measurement period, the employee’s supervisor will identify on the Critical Competencies/Education Profile (CEP) form those critical competencies that are to be achieved by the employee. At the end of the measurement period, the supervisor will annotate the form with a “Y” to indicate the employee has successfully achieved the expected improvement of the individual competency, or, will annotate with an “N” to indicate that the employee did not achieve the expected level of improvement of that individual competency. An indication of a Y or an N only indicates the employee did or did not achieve the planned increase in each individual competency. It does not indicate an acceptable or unacceptable level of competency, but merely if the employee achieved the change outlined by the supervisor at the beginning of the measurement period.

2) During the measurement period, generally at a six month or one-year interval, the critical competencies indicated by the supervisor at the beginning of the measurement period should be reviewed and discussed with the employee. If the focus of the employee’s position has changed since the beginning of the period, the supervisor may at any time prior to the end of one full year of the measurement period close out the previous competency/competencies and indicate a different set of critical competencies to be in effect for the remainder of the measurement period. The close out and resultant change of competency selection must be accompanied by a narrative describing the reason for the change.

3) No official feedback document is required for critical competencies. Each supervisor should on a continuing basis review and discuss with the employee, his or her progress, or lack thereof, in relation to each critical competency to be attained during the measurement period. Courses, seminars, books, and other materials may be suggested by the supervisor to assist the employee in accomplishment of the competencies.
e. Competencies/Education Profile (CEP) Form

1) A CEP form will be filled out by the employee’s PAR rating supervisor at the beginning of the measurement period for each employee eligible to receive a special compensation award as approved by the agency head. After the competencies and education/training goals have been discussed with and agreed to by the employee, the rating supervisor will submit the CEP form to the employee’s PAR first level reviewer for approval. Approved CEP forms will be maintained by the employee’s supervisor or in the employee’s PAR supplemental employee folder.

2) During the last fourteen days prior to the end of the first year of the measurement period (or during the PAR review and feedback sessions), the CEP form should be reviewed by the employee’s rating supervisor, and the status of the employee’s accomplishment of competencies and completion should be discussed with the employee. Any changes to the critical competencies to be accomplished must be made by the end of the first year of the measurement period and initialed by the employee and then approved by the employee’s first level reviewer and by the agency head.

3) A copy of the CEP form must be maintained in the employee’s file for all requests for a special compensation award. These forms are subject to post award review by the ITPDC or by the Mississippi State Personnel Board.

D. STATUS

Inclusion in the Special Compensation Plan shall not be construed to exclude any position or employee from state service where such position or employee is designated as state service, nor shall inclusion be construed to confer permanent status on employees designated as non-state service. Refer to Section 25-9-107 (c), Mississippi Code of 1972, Annotated.

E. CLASSIFICATION AND PAY PLAN

The Mississippi State Personnel Board shall classify all positions in the Special Compensation Plan by assigning each position to its appropriate job classification according to the position description and the organizational placement of the position.

A pay range shall be assigned by the Mississippi State Personnel Board to each position in the Special Compensation Plan on the basis of the prevailing wage in the relevant labor market and criteria such as those set forth in the Mississippi State Personnel Board Policies and Procedures Manual. The pay ranges assigned to Special Compensation Plan positions shall be adjusted to maintain competitive market levels.
F. RECRUITMENT AND APPOINTMENT

1. Hiring of new employees into information technology positions shall be exempted from the Certificate of Eligibles process established by the Mississippi State Personnel Board, provided the applicant meets the minimum qualifications of the classification of the position into which he or she is being appointed.

2. Vacant information technology positions must be reallocated to the appropriate classification within the Special Compensation Plan prior to an initial appointment being made.

G. SALARY RESTRICTIONS

1. No new appointee to a Special Compensation Plan position shall be awarded a salary in excess of end salary.

2. Current statutory salary restrictions remain in effect.

3. Salary increases under these policies shall be calculated so as not to result in personal services funding shortfalls, employee reductions-in-force, or the unsupported reallocation of vacant positions.

4. All salary increases must be accomplished from within funds available.

H. ROLE DESCRIPTION QUESTIONNAIRE (RDQ)

General Policies

1. For all instances where the Job Content Questionnaire is cited in this memorandum, The State Personnel Board Policy and Procedures Manual, other policy memorandum or statements, for Information Technology classifications qualified under the IT Special Compensation Plan a Role Description Questionnaire (RDQ) shall be used in place of the Job Content Questionnaire. Copies of the RDQ and related guidelines may be obtained from the Mississippi State Personnel Board.

2. Requests for all personnel actions for positions allocated to classifications under the IT Special Compensation Plan shall be accompanied by a completed and signed RDQ. Submission of the request in SPAHRS indicates agency endorsement.
Attachment No. 1 to Special Compensation Plan for Information Technology Classifications - FY 2011

Information Technology Professional Development Committee

I. The Information Technology Professional Development Committee (ITPDC) is chartered by the Mississippi State Personnel Board (SPB) as an advisory group for the field of information technology.

II. The purpose of the ITPDC is to make recommendations to the Mississippi State Personnel Board on specific requested personnel actions within the field of information technology, as detailed below.

III. Composition of the ITPDC:

A. The Committee will consist of ten (10) members.

B. In order to have a quorum for a meeting of the Committee, at least five (5) members must be present.

C. The Mississippi State Personnel Board Executive Director, or an SPB staff member designated by the State Personnel Board Executive Director, will be a permanent member of the ITPDC.

D. The ITS Executive Director, or an ITS staff member designated by the ITS Executive Director, will be a permanent member of the ITPDC.

E. The Chairmanship of the Committee will rotate on a fiscal year basis between the Mississippi State Personnel Board Executive Director or his/her designee and the ITS Executive Director or his/her designee. The Mississippi State Personnel Board Executive Director will serve as chair in odd-numbered fiscal years; the ITS Executive Director will serve as chair in even-numbered fiscal years.

F. The other eight (8) Committee members will be appointed by the Mississippi State Personnel Board from a list of nominees submitted by the ITS Executive Director, as follows:

1. Two (2) additional staff members from ITS

2. Three (3) Information Services Directors from state agencies with large information technology staffs (i.e. ten or more full-time positions for jobs in the information technology career model).

3. Three (3) additional information technology professionals from other state agencies.
IV. Length of term:

A. Members are appointed for staggered six (6) year terms.

B. If an individual on the committee leaves state employment, changes agencies, or moves to a non-technology job within the agency, a new member will be appointed to fill the remainder of that individual’s unexpired term.

V. Scope of the Committee’s Review and Recommendations:

A. Review and make recommendations for requests related to the level of information technology positions required within a state agency to effectively perform its technology functions, such as reallocations and requested new positions.

B. Review and make recommendations concerning the appropriateness of educational requirements associated with the information technology job classifications.

VI. Meeting Schedule:

A. The Committee’s regular meeting will be held on the second Tuesdays of each calendar month.

B. If there are no pending requests for the Committee’s consideration, the Committee will not meet.

C. Requests to be considered by the Committee should be submitted to the State Personnel Board two weeks prior to the Committee meeting.

D. An ad hoc meeting of the Committee can be called at any time at the request of the Chairperson of the Committee.
Attachment No. 2 to Special Compensation Plan for Information Technology Classifications - FY 2011

Competencies/Education Profile Forms
Employee Name: _______________________________ Date: ____________
Classification Title: _______________________________ PIN: ____________
Agency: _______________________________
Rating Supervisor: _______________________________ PIN: ____________
1st Level Reviewer: _______________________________ PIN: ____________

Competencies/Behavior Indicators

Indicate for each checked competency: (Y) Yes (N) No Value Added

- □ Adaptability: ___________________________________________________ [ ]
- □ Coaching and Developing Others: _________________________________ [ ]
- □ Decisive Insight: _______________________________________________ [ ]
- □ Holding People Accountable: _____________________________________ [ ]
- □ Impact and Influence: ___________________________________________ [ ]
- □ Information Gathering: __________________________________________ [ ]
- □ Vision Communication: __________________________________________ [ ]
- □ Leadership: ____________________________________________________ [ ]

Measurement period for competencies to be accomplished: __________ to: __________

Signatures (at the beginning of the measurement period):

<table>
<thead>
<tr>
<th>Employee</th>
<th>Date</th>
<th>Rating Supervisor</th>
<th>Date</th>
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1st Level Reviewer: _______________________________ Date: ____________
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<tr>
<th>Course/Conference Title</th>
<th>Indicate number of contact hours for each checked education/training item listed</th>
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<td>TOTAL HOURS:</td>
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**SUMMARY for Submission**

For the measurement period from: ___________ to: ___________ this employee received a rating of Yes for value added on ____ competencies and completed _____ contact hours of education/training and therefore is eligible to receive an Increased Value Compensation as allowed by this agency for Fiscal Year ____________.

Signatures (at the end of the measurement period):

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<tr>
<th>Employee</th>
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<th>Rating Supervisor</th>
<th>Date</th>
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<tr>
<th>1st Level Reviewer</th>
<th>Date</th>
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</table>
Employee Name: ________________________________ Date: ____________

Classification Title: ________________________________ PIN: ____________

Agency: __________________________________________

Rating Supervisor: ________________________________ PIN: ____________

1st Level Reviewer: ________________________________ PIN: ____________

Competencies/Behavior Indicators
Indicate for each checked competency:
Please check those to be measured:
(Y) Yes  (N) No Value Added

- Analytical Thinking/Attention to Detail: ________________________________ □
- Business Perspective: ________________________________ □
- Communication: ________________________________ □
- Customer Advocate: ________________________________ □
- Facilitating Effective Relationships: ________________________________ □
- Willingness to Learn: ________________________________ □
- Fostering Innovation/Leading Change: ________________________________ □
- Project Performance: ________________________________ □

Measurement period for competencies to be accomplished: ____________ to: ____________

Signatures (at the beginning of the measurement period):

Employee Name: ___________________________ Date: ____________
Rating Supervisor: ___________________________ Date: ____________

1st Level Reviewer: ___________________________ Date: ____________
Infrastructure Roles: Page #2

Education/Training Contact Hours

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<thead>
<tr>
<th>Course/Conference Title</th>
<th>Indicate number of contact hours for each checked education/training item listed</th>
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TOTAL HOURS:  

SUMMARY for Submission

For the measurement period from: ___________ to: ___________ this employee received a rating of Yes for value added on _____ competencies and completed _____ contact hours of education/training and therefore is eligible to receive an Increased Value Compensation as allowed by this agency for Fiscal Year ___________.

Signatures (at the end of the measurement period):

Employee __________________________ Date _______ Rating Supervisor __________________________ Date _______

1st Level Reviewer __________________________ Date _______
Employee Name: _______________________________ Date:______________

Classification Title: _______________________________ PIN:______________

Agency:__________________________________________________________________________

Rating Supervisor: _______________________________ PIN:______________

1st Level Reviewer: _______________________________ PIN:______________

Competencies/Behavior Indicators

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<tr>
<th>Indicate for each checked competency:</th>
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<tr>
<td>(Y) Yes   (N) No Value Added</td>
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</tbody>
</table>

- □ Analytical Thinking/Attention to Detail: ____________________________________________

- □ Business Perspective: __________________________________________________________

- □ Communication: ___________________________________________________________________

- □ Customer Advocate: ________________________________

- □ Facilitating Effective Relationships: ______________________________________________

- □ Willingness to Learn: ____________________________________________________________

- □ Fostering Innovation: ________________________________

- □ Personal Accountability: ________________________________

Measurement period for competencies to be accomplished: ____________ to: ____________

Signatures (at the beginning of the measurement period):

Employee __________________________________________________________________________

Date ____________ Rating Supervisor __________________________________________________________________________

Date ____________

1st Level Reviewer __________________________ Date ____________
<table>
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<tr>
<th>Course/Conference Title</th>
<th>Education/Training Contact Hours</th>
<th>Indicate number of contact hours for each checked education/training item listed</th>
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</table>

**TOTAL HOURS:**

**SUMMARY for Submission**

For the measurement period from: __________ to: __________ this employee received a rating of Yes for value added on ____ competencies and completed _____ contact hours of education/training and therefore is eligible to receive an Increased Value Compensation as allowed by this agency for Fiscal Year ____________.

Signatures (at the end of the measurement period):

Employee __________________________ Date ________ Rating Supervisor __________________________ Date ________  

1st Level Reviewer __________________________ Date ________
Competencies/Education Profile Form
Information Technology Special Compensation Plan
System Delivery Roles: Page #1

Employee Name: _____________________________ Date: ________________

Classification Title: ___________________________ PIN: ________________

Agency: ______________________________________

Rating Supervisor: _____________________________ PIN: ________________

1st Level Reviewer: _____________________________ PIN: ________________

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<tr>
<th>Competencies/Behavior Indicators</th>
<th>Indicate for each checked competency:</th>
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<td>(Y) Yes (N) No Value Added</td>
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</table>

- Analytical Thinking/Attention to Detail: _____________________________ □
- Business Perspective: _____________________________ □
- Communication: _____________________________ □
- Customer Advocate: _____________________________ □
- Facilitating Effective Relationships: _____________________________ □
- Willingness to Learn: _____________________________ □
- Personal Accountability: _____________________________ □
- Project Performance: _____________________________ □

Measurement period for competencies to be accomplished: _____________ to: _____________

Signatures (at the beginning of the measurement period):

Employee Date Rating Supervisor Date

1st Level Reviewer Date
Competencies/Education Profile Form

System Delivery Roles: Page #2

Information Technology Special Compensation Plan

Education/Training Contact Hours

Course/Conference Title

Indicate number of contact hours for each checked education/training item listed

1. ____________________________________________________________________

2. ____________________________________________________________________

3. ____________________________________________________________________

4. ____________________________________________________________________

5. ____________________________________________________________________

6. ____________________________________________________________________

7. ____________________________________________________________________

TOTAL HOURS: ____________

SUMMARY for Submission

For the measurement period from: ___________ to: ___________ this employee received a rating of Yes for value added on _____ competencies and completed _____ contact hours of education/training and therefore is eligible to receive an Increased Value Compensation as allowed by this agency for Fiscal Year ____________.

Signatures (at the end of the measurement period):

Employee ___________________________ Date ___________ Rating Supervisor ___________________________ Date ___________

1st Level Reviewer ___________________________ Date ___________
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July 2010