##### GRADING REQUEST FORM

Please complete Sections A-C and return this form by email to grading@falkirk.gov.uk and copy in your HR Business Partner

All grading requests must be accompanied by a Job Profile (submitted via <https://jobsatfalkirk.intranet.falkirk.gov.uk> ) and structure chart. If this is the redesign of an existing post please send a tracked changes copy of the Job Description so that we can see what the amendments are.

**Please note that Grading Request Forms must be signed by a Head of Service/Director.**

Please refer to the points for consideration under Section B before submitting your request.

###### **SECTION A – GENERAL DETAILS**

|  |  |
| --- | --- |
| Service |   |
| Job Title |   |
| Post ID (If available)  |   |
| Current Grade\* |   |
| Current postholder\*  |  |
| Temporary or Permanent? (please delete as appropriate) | TEMPORARY / PERMANENT |
| Line Manager Name |   |
| Line Manager Title |   |
| Contact number |   |
| E-mail address |   |

\*Please complete this field if the post exists at present, mark as n/a if this is a new post.

SECTION B – REASON FOR GRADING REQUEST

In line with the Vacancy Management Guidelines, please detail below the reason for this grading request.

Please indicate whether this is a:

|  |
| --- |
|[ ]  New post or; |
|[ ]  Re-design of an existing post as a result of review /restructure (please attach a Job Description with tracked changes showing the amendments when submitting this request) |
|[ ]  Is this a Council of the Future post? Please provide more information regarding this:  |
|[ ]  Alteration of duties of existing post (please attach a Job Description with tracked changes showing the amendments when submitting this request) |

**Points for consideration**

Please consider the following points in advance of submitting a grading request.

|  |  |
| --- | --- |
|  | Do you have the budget for the post? |
|  | Do you have approval from your Service Manager/Director to undertake a grading? |
|  | In respect of re-evaluations, do you agree that there are substantial changes to the post, if so, please highlight below. *If not, it is your* r*esponsibility to advise the employee that you cannot support a request for re-grading and explain your reasons why.* |
|  | Have you spoken to your HR Business Partner regarding proposed changes to a post or implementation of a new post? Have consultations taken place with Trade Unions or other stakeholders where appropriate? *If not, this should be your first point of contact to ensure a grading request is appropriate.* |
|  | Is the post part of a wider structure review? If so, what is the impact of this grading on other posts? Consideration should be given to the order of posts submitted for grading (*this would normally be the most senior post first*).  |
|  | Do you have all the necessary information to complete an evaluation – e.g. do you know the structure, staff responsibility, budgets etc? These are key factors in the evaluation process and a grading cannot be concluded without this information. |
|  | If there are existing/substantive postholders have they been consulted on the changes being made to their post? This can include reviewing the changes being made to the Job Profile and/or they can also participate in grading interviews/reviews of the grading profiles |

Please provide a summary of the **key or substantial** changes (this should focus on specific responsibilities that have changed e.g. addition/removal of line management, allocation/removal of budget responsibilities etc.) **OR** provide background information about the reasons for the introduction of this post to the Council: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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

When did these changes come into effect? If this is a future date please advise if current employees have been consulted:

Please provide details of any other posts within the team and/or Council which would potentially be affected as a result of this grading e.g. if this post is taking on budget responsibilities, which post had those responsibilities previously and does this change the grading of the other post e.g. does the other post still retain the same level of budget responsibilities?

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

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

If approval has already been received, please confirm what level of approval was received for this post (i.e. Director level, Chief Executive, P&R Committee) and what date the approval was received:

|  |  |
| --- | --- |
| Approval method: |   |
|  |   |
|  |  |
| Date of approval: |   |

SECTION C – AUTHORISATION

Please authorise below as appropriate and submit this form as an attachment to grading@falkirk.gov.uk and copy in your HR Business Partner. On receipt of this form you will receive an automated response advising you of next steps and timescales, following which you will be contacted by a member of the Grading team to progress your request.

|  |  |  |  |
| --- | --- | --- | --- |
| Line Manager | Name  |  | Date  |
| Job Title |  |  |
| Head of Service/ Director | Name  |  | Date  |