



LOCAL 21 EXTENDED RANGES FORM		
Employee Name	Employee ID #	Class # and Title
Current Hourly Base Salary (\$xx.xxxx)	Duration of Placement in Extended Range <input type="checkbox"/> indefinite <input type="checkbox"/> temporary	Duration of Placement (if temp) <i>(mo/day/yr through mo/day/year)</i>
Current Step	Proposed Extended Range <input type="checkbox"/> 2.5% <input type="checkbox"/> 5.0% <input type="checkbox"/> 7.5%	Departmental Funds Available?
Department Number, Name and Division		
<p>Placement in an extended salary range is subject to the approval of the Department of Human Resources and must be submitted through your department's Human Resources Division.</p> <p>Please select the applicable justification(s) supporting the request and provide related information. Departments are required to clearly articulate a detailed, objective, and factual analysis that supports the rationale for the request.</p> <p>Further, departments must evaluate the compensation of other employees in the same classification performing the same work. Such employees should only be paid differently if it can be validated by one of more of the following business related reasons:</p> <ul style="list-style-type: none"> • Performance/ merit • Education/ training • Experience • Seniority 		
<input type="checkbox"/> Special Skills <input type="checkbox"/> Recruitment/Retention <input type="checkbox"/> Special Assignment <input type="checkbox"/> Performance		
Related Information Justifying Placement in an Extended Salary Range		

Please submit this form along with additional supporting documents to the Department of Human Resources, Classification and Compensation Division, via email to Monica.Guzman@sfgov.org .