



FLORIDA STATE UNIVERSITY
 OFFICE OF HUMAN RESOURCES
 282 Champions Way
 PO Box 3062410
 Tallahassee, FL 32306-2410
 Phone: (850) 644-6034

MASS OPS EXEMPT REQUEST FORM

INSTRUCTIONS:

- This form should be used for groups of OPS Exempt appointments with the same Supervisor, Job Code, Department, Job Duties, Salary, and Hours per week.
- This form must be completed for all OPS Exempt appointments to ensure the minimum salary and job duty requirements are met.
- Completed OPS Exempt Request Forms must be signed by the department and approved by HR prior to the employee's first day of work.
- Department Representatives should upload completed/HR approved forms to **My Tasks > Supplemental Documents (Admin)** for each applicable employee's onboarding.

APPOINTMENT INFORMATION:

Hours per week: _____ Job Code: _____
 Position Title: _____ Department: _____
 Department Contact: _____ Contact Email: _____

JOB DUTIES:

Select the most appropriate category to describe the job duties:

SALARY LEVEL TEST:

Provide the weekly salary for the appointment:

Job Duties Category:	Minimum Pay:
Learned Professional	\$684 per week
Creative Professional	\$684 per week
Administrative	\$684 per week
Student Relationship	\$12.00 per hour
Instruction/Teaching	\$12.00 per hour
Medical Residency (Clinical)	\$12.00 per hour

QUALIFICATIONS OF POSITION:

Education Level Required:

List the minimum qualifications necessary to perform assigned duties of this position:

List any certifications and/or licenses necessary to perform the duties of the position:

