

FEDERAL WAGE SYSTEM - WAGE DATA COLLECTION

*Form Approved
OMB No. 3206-0036
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The public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (3206-0036), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ADDRESS.

1. ESTABLISHMENT NAME	2. WAGE AREA	3. DATE OF CONTACT (YYYYMMDD)
4a. ESTABLISHMENT JOB TITLE	b. UNION AFFILIATION	c. ESTABLISHMENT GRADE

5. SURVEY JOB TITLE

6. AREA CODE	7. ESTABLISHMENT CODE	8. JOB NUMBER	9. FORMAL RATE RANGE		10. JOB RATE RANGE		11. NUMBER OF ESTABLISHED STEP RATES
			YES	NO	MINIMUM	MAXIMUM	

12. ESTABLISHED STEP RATES	13. JOB MATCH	14. NUMBER OF EMPLOYEES	15. STRAIGHT TIME HOURLY RATE	16. GUARANTEED MINIMUM	17. INCENTIVE RATE
	Y = YES N = NO	18. COST OF LIVING ALLOWANCE (COLA)	19. BONUS	20. LUMP SUM	21. JOB SUB-NUMBER
			TOTAL		

22. DESCRIPTION OF ESTABLISHMENT JOB

23. DO ABOVE RATES INCLUDE	24. REMARKS																		
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:15%;">NO</th> <th style="width:15%;">YES</th> <th style="width:70%;">AMOUNT</th> </tr> <tr> <td></td> <td></td> <td>COLA</td> </tr> <tr> <td></td> <td></td> <td>BONUS</td> </tr> <tr> <td></td> <td></td> <td>LUMP SUM</td> </tr> <tr> <td></td> <td></td> <td>SHIFT PAY</td> </tr> <tr> <td></td> <td></td> <td>OTHER ADD-ONS <i>(Explain)</i></td> </tr> </table>	NO	YES	AMOUNT			COLA			BONUS			LUMP SUM			SHIFT PAY			OTHER ADD-ONS <i>(Explain)</i>	
NO	YES	AMOUNT																	
		COLA																	
		BONUS																	
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		OTHER ADD-ONS <i>(Explain)</i>																	

25. SIGNATURE	26. SIGNATURE	PAGE
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