

Special Salary Rate Request Form

OPM Form 1397

Instructions

General

1. The Special Salary Rate Request Form (Office of Personnel Management (OPM) Form 1397) is an optional form that agencies may use to request that OPM establish, adjust, terminate, or modify coverage of special salary rates under the authority of 5 U.S.C. 5305 and 5 CFR part 530, subpart C. Special salary rates are higher rates of basic pay that are established for a group or category of General Schedule (GS) positions in one or more geographic areas to address existing or likely significant handicaps in recruiting or retaining well-qualified employees.

You may use an alternative format to submit data and information required in a special salary rate request. However, you must ensure that all of the available data and information requested by OPM Form 1397 are included in the alternative format.

2. An agency initiating a request to establish or adjust a special salary rate may be required to coordinate the request with all other affected agencies and aggregate the required staffing data from each agency. Contact OPM before submitting any special salary rate request to determine if your agency is required to coordinate the request with other agencies.
3. If you are requesting more than one special rate table for a category of positions (each covering a different geographic area, for example) fill out a separate Form 1397 (or alternative) for each table requested. As part of the analysis, OPM may request that you break down data even further.
4. For each type of special salary rate request covered by this form, you must provide a narrative justification and/or explanation on the reason for the request. See the specific instructions, below, on the type of narrative information needed.
5. When applicable, include the proposed special rate schedule with your request.

Section I - Type of Special Salary Rate Request and Agency Contact Information

1. Use OPM Form 1398 if you are requesting an increase equal to the General Schedule increase as part of OPM's annual review of special salary rates. Do not use this form for such requests.
2. For all other types of special rate requests, in this section you must indicate the type of special salary rate request, follow the italicized instructions provided for each type of request, and provide agency contact information.

Section II - Coverage

Follow the instructions provided on the form for this section. If the request involves an existing special salary rate authorization and no change in occupation, agency, or geographic coverage is involved, do not complete this section. Please ensure that the existing special rate table number is provided in section I.

Section III - Staffing Status

1. Follow the instructions provided on the form for this section. If data is unavailable, explain the reason in the narrative justification of your request.
2. When aggregating data from more than one organization, geographic location, or agency, each organization/location should provide data for the same period of time, i.e., use the same beginning and ending dates, if possible.

Section IV - Recruitment and Turnover

1. Follow the instructions provided on the form for this section. If data is unavailable, explain the reason in the narrative justification of your request.
2. "Transfer Data" is needed only for those special salary rate requests in which a significant portion of the staffing problems are attributable to employees leaving for positions in other Federal pay systems.
3. Because the "Number Hired" data is a subset of the "Offers Made" data, the amount of "Number Hired" should not exceed the number of "Offers Made" at each grade level.
4. Because the "Quits for Pay" data is subset of the "Quits" data, the number of "Quits for Pay" should not exceed the number of "Quits" at each grade level.

Section V - Proposed Special Rate Schedule

Attach a copy of the proposed special salary rate schedule. Explain the basis for the recommended salaries and how they were derived. Provide copies of any salary survey data and information that were used in developing the recommended rates. If you conduct your own salary surveys, you may use the salary comparison worksheet provided as an appendix to this form to document the salary data collected and include a copy of this worksheet with your request. For all salary survey data and information, equate the positions surveyed to General Schedule grade levels so that we can accurately compare salary differences. Note: OPM may have certain off-the-shelf salary surveys and other resources available for pay comparisons. Contact OPM before researching salary survey information.

Section VI - Cost Estimate

1. The costs for each grade must be determined as follows:
 - a. Determine the number of employees at each grade and step based on the latest available data (but not earlier than as of the ending data specified in section III of this form). Place all employees with step 00 at step 10.
 - b. Subtract the current annual payable rate for each grade and step (the higher of the applicable General Schedule rate of basic pay, locality-adjusted rate of pay, or existing special salary rate) from the recommended annual special salary rate for that grade and step. (Note: If the special rates will cover positions in non foreign areas, the additional costs for non foreign area cost-of-living allowances must be included in the cost estimate.) For each step, multiply the difference derived in step b. by the total number of employees at that step.
 - c. Total the dollar cost derived in step c. for all steps in each grade.
 - d. For each grade, document the total dollar cost determined under step 4 in the "Cost" column of section VI of this form. Total the cost for each grade and document in the "Total" block. Attach any worksheets used to derive the cost estimate to this request.

Note: This cost estimate covers direct salary costs only and excludes additional costs attributable to retirement, overtime pay, and other benefits that are calculated on the basis of an employee's rate of basic pay. This cost estimate does not cover the costs associated with filling positions that are currently vacant.

2. If you expect to **significantly** increase (i.e., by more than 10 percent) the number of on-board employees in the group covered by the proposed special rate schedule over the coming year (by filling vacancies or by increasing authorized positions), you must also provide projected employee counts by grade. OPM may use this data to produce a second cost estimate based on projected employment levels. Document this projection in the narrative information.

Section VII - Narrative Information

1. For each special rate request covered by this form, provide a narrative justification of the reason for the request consistent with the criteria and requirements in 5 CFR part 530, subpart C.
2. Provide the following narrative information for initial special rate requests, requests to increase or change the coverage (occupation, grade, agency, or geographic) of an existing special rate, and requests to increase existing special rates by greater than the General Schedule increase as part of the special rate annual review:
 - a. Explain the cause of the significant recruitment or retention problems.
 - b. Explain whether special rates are needed to address an (1) existing recruitment or retention problem or (2) a recruitment or retention problem that is likely to exist in the future if special rates are not approved. If your agency determines that special rates are needed to address a likely recruitment or retention problem, explain the basis and provide evidence to support this determination, including estimates of the number of vacant positions and/or quits for comparable positions that are likely to occur if the special rate request is not approved.
 - c. Explain how the nature of the existing labor market is affecting your agency's ability to recruit or retain employees covered by the request.
 - d. Explain the degree to which your agency has considered and used other pay flexibilities to alleviate the staffing problems, including recruitment and relocation bonuses, retention allowances, superior qualifications appointment authority, student loan repayments, and performance awards.
 - e. Explain the degree to which your agency has considered and used other non-pay solutions to the staffing problems, such as conducting aggressive recruiting programs, using appropriate appointing authorities, redesigning jobs, establishing or enhancing training programs, authorizing flexible work schedules and/or telework arrangements, and improving working conditions.
 - f. Explain how the staffing problem is affecting accomplishment of your agency's mission.
 - g. Explain and provide estimates of the costs attributable to the staffing situation which would be offset if this special salary rate is approved, such as overtime, contracting, training, recruiting, or other costs.

Section VIII - Agency Certification

For each type of special rate request, provide a certification from the appropriate authorized agency official.

Appendix - Salary Comparisons

Follow the instructions in the Appendix for documenting and analyzing salary survey data.

**U.S. Office of Personnel Management
Special Salary Rate Request Form**

Section I - Types of Special Salary Rate Request and Agency Contact

Please indicate the type of special salary rate request by checking the appropriate box(es) below and following the italicized instructions for each type of request.

Initial request / Review other than annual review / Termination

Initial request for special salary rates.
Complete sections II through VIII-A.

Out-of-cycle request for increase in an existing special salary rate authorization.
Complete sections III through VIII-A.

Reduce or terminate an existing special salary rate authorization.
Complete sections VII through VIII-B.

Request to modify coverage of an existing special salary rate authorization.
Complete sections II through VIII-A, as applicable.

Request to be excluded from an initial special rate request or from an existing special salary rate authorization.
Complete sections VII and VIII-B.

Annual review of existing authorizations where increase requested is:

Less than the General Schedule increase, including a zero increase.
Complete sections VII, VIII-A, and fill in Total Positions in section III, Ending Snapshot.

Greater than the General Schedule increase.
Complete sections III through VIII-A.

Reduction of current schedule.
Complete sections V, VII, VIII-B, and fill in Total Positions in section III, Ending Snapshot.

(Note: If you are requesting an increase equal to the General Schedule increase, use OPM form 1398.)

For existing authorizations, please enter the special salary rate table number:

Has your agency contacted other agencies that may be affected by this request?

Yes No Please explain in narrative information, section VII.

Name of submitting agency:

E-mail address:

Name of preparer:

Telephone:

Date prepared:

Section II - Coverage

For existing authorizations, if there is no change in occupation, agency, or geographic coverage, it is not necessary to complete this section. Please be sure that the existing special salary rate table number is entered on the front page of this form.

A. Occupation(s):

Enter the occupation series code and job title for each occupation covered by this request. If all jobs within an occupation series are covered, enter "All" under job title.

| Occupation Series Code | Job Title | Occupation Series Code | Job Title |
|------------------------|-----------|------------------------|-----------|
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B. Agencies/Geographic Locations:

Please enter the name and code of each agency and sub-element with positions covered by this request. Specify geographic location codes for all but nationwide or worldwide authorizations.

| Agency/ Sub-element Code | Agency/ Sub-element Name | Duty Station Code(s), State, City, County, Locality Pay Area, etc., as applicable | Duty Station Name(s) |
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As a guide for specifying the exact locations to be covered by the proposed special salary rate authorization, use the duty station code and its narrative description contained in items 38 and 39 on the SF-50 of the employees for whom special salary rates are being requested. List the duty station codes for all locations to be covered. For agency/sub-elements, use the four-digit agency code found in item 47 on the SF-50. Also, you may access this information at <http://www.opm.gov/feddata/guidance.asp>.

Section III - Staffing Status

Staffing data presented on this page should represent a snapshot of your staffing situation at two specific times: the beginning date and the ending date.

If more than one agency is involved in this request, the OPM-designated lead agency should aggregate all staffing data for all agencies involved in this request.

All numbers should be current to within 60 days of submission, if possible. The period of time between the beginning and ending date should be at least 6 months to 1 year.

Definitions of categories (at beginning date/ending date):

| | |
|-------------------------|---|
| On Board | Total filled positions in the grade and occupation, at that time. |
| Vacant Positions | Total number of positions your agency was trying to fill at that time with appropriate authority and funding. |
| Total Positions | The sum of the on board and vacant positions, at that time. |

Beginning Date:

Ending Date:

| GS Grade | Beginning Snapshot | | | Ending Snapshot | | |
|----------|--------------------|--------------------|-------------------|-----------------|--------------------|-------------------|
| | On Board | + Vacant Positions | = Total Positions | On Board | + Vacant Positions | = Total Positions |
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Section IV - Recruitment and Turnover

Staffing data presented on this page should represent recruiting and turnover that occurred during the entire reporting period as defined by the beginning and ending snapshot dates. (See section III of this form.)

The OPM-designated lead agency should aggregate all recruitment and turnover data for all agencies involved in this request.

Definitions of categories:

Recruitment during the period:

| | |
|--------------------------------|--|
| Positions Tried to Fill | Number of vacancies the agency tried to fill, with appropriate authority and funding. |
| Offers Made | The number of bona fide offers of employment made to persons within and outside the Federal service, under any appointing authority, who met all pre-employment screening required by your agency. |
| Number Hired | The total number of persons hired by your agency from within and outside the Federal service in the occupations and grades covered. |

Turnover during the period:

| | |
|----------------------|--|
| Transfers | Total number of employees who left a position covered by this request to take a position in another Federal agency with independent statutory authority to set higher pay rates, if available. (Transfer data not required if not applicable to staffing problem.) |
| Quits | Total number of employees who left Federal employment. Do not count retirements and involuntary separations as quits. |
| Quits for Pay | Total number of employees who left Federal service to take an equivalent position outside the Government, in the same occupation and location, because the salary is higher. (Quits for pay is a subset of quits.) |

| GS Grade | Recruitment During the Period | | | Turnover During the Period | | |
|----------|-------------------------------|-------------|--------------|----------------------------|-------|---------------|
| | Positions Tried to Fill | Offers Made | Number Hired | Transfers | Quits | Quits for Pay |
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Section V - Proposed Special Rate Schedule

Attach a copy of the proposed special rate schedule if requesting a new or revised special salary rate authorization.

Section VI - Agency Costs

Data presented on this page should represent the estimated annual cost of the requested special salary rate authorization.

Total Number of Employees - The On Board data from the Ending Snapshot, section III, of this form.

Annual Cost - See section VI of instructions for calculating costs.

| GS Grade | Total Number of Employees | Annual Cost |
|---------------|---------------------------|-------------|
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| Totals | | |

Section VII - Narrative Information

For each type of special salary rate request covered by this form, provide a narrative justification of the reason for the request. Provide additional narrative information as required by the instructions to this form.

Section VIII - Agency Certification

Type or print the name of the certifying official in the blank space provided in the text of the certification.

A. Initial Requests or Requests to Increase an Existing Schedule

Please use this certification for all requests that involve the initial granting of special salary rates or an increase to an existing authorization.

The OPM-designated lead agency should collect and attach certifications for each agency involved in this request.

I, _____, certify that the special rates requested are necessary to ensure staffing adequate to accomplish the agency's mission. This agency has made reasonable efforts to overcome the staffing problems in other ways, including use of some or all of the available human resources flexibilities.

Position of certifying official _____ Agency Name _____

Signature of certifying official _____ Date of signature _____

B. Request for Termination/Reduction/Exclusion

Please use the appropriate certification to request termination or reduction of an existing special salary rate authorization or to be excluded from either a new request or an existing authorization. If termination or reduction is requested and more than one agency is covered by this authorization, generally all should agree to its termination or reduction, and so certify.

I, _____, certify that the special salary rate authorization specified in special salary rate table number _____ is no longer required by this agency to alleviate a staffing problem. Termination of the authorization is hereby requested.

I, _____, certify that the special salary rate authorization specified in special salary rate table number _____ is no longer required at the same level. Reduction of the rates is hereby requested.

I, _____, certify that this agency wishes to be excluded from:
this request for special salary rates, or
the existing special salary rate authorization specified in special salary rate table number _____.

Position of certifying official _____ Agency Name _____

Signature of certifying official _____ Date of signature _____

Appendix - Salary Comparisons

Complete one data collection worksheet for each occupation and level (grade) surveyed.

Federal Job:

Title: _____ Series: _____ GS Grade: _____

Comparison Job:

Title: _____

| Name of Employer Surveyed ^{1.} | Average Annual Starting Salary of New Hires in the Last 12 Months (Only need if entry or developmental level) | Number of New Hires in Last 12 Months | Average Annual Base Salary of Incumbents | Number of Incumbents | Minimum Annual Base Salary Rate Paid ^{2.} | Maximum Annual Base Salary Rate Paid ^{2.} |
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1. Non-Federal employers may include State, county, municipal, and not-for-profit organizations if they represent significant competition for well-qualified persons. Federal employers may be surveyed if they have independent statutory authority to set higher rates and if they represent significant competition for well-qualified persons.

2. Provide minimum and maximum base salary actually paid by the employer in the comparison job. If needed, also provide minimum and maximum annual base salary rate applicable to the position.

Other Salary comparison Information: