



REQUEST FOR BILINGUAL PAY TEA

PURPOSE

Bilingual pay is recognized for employees who can communicate with residents and customers in languages other than English as part of their regular job duties. Requests for bilingual pay will be on the basis of oral communication.

ELIGIBILITY

Employees filling classifications specifically requiring bilingual ability and passing the Town's certified oral examination shall be compensated at 2.5% above the normal compensation range for the regular classification. The provision of bilingual pay will be evaluated annually in a manner prescribed by the Town, and continued or discontinued based on operational need. The decision as to whether bilingual pay will continue or be discontinued shall be made by the Town Manager, is final and is not subject to grievance or appeal. If bilingual pay is discontinued, the effective date shall be the beginning of the first full pay period in January.

Section I: *To be completed by Employee*

Name: _____
Job Classification/Title: _____ Department: _____
Work Phone: _____ Supervisor: _____

1. *Language used on the job (other than English)? _____
2. How frequently is the language used on the job? _____
3. What are the circumstances requiring the use of this language on the job?

EMPLOYEE SIGNATURE: _____ DATE: _____

SUPERVISOR SIGNATURE: _____ DATE: _____

Section II: *To be completed by Department Head*

Request for Bilingual Pay is: Approved Denied

TOWN MANAGER USE ONLY

Discontinued

DEPARTMENT HEAD SIGNATURE: _____ DATE: _____

Section III: *To be completed by Human Resources*

Results of Bilingual Test: Pass Fail Dates of Results: _____

HR USE ONLY

Effective Pay Period Start or End Date for Bilingual Pay: _____
Employee and Supervisor notified of Bilingual Pay on: _____