



# CMM Member - Update

## Employment Experience

**Note:** Document each new position, not previously submitted, in the format below

Title: \_\_\_\_\_ Department: \_\_\_\_\_ Local Government: \_\_\_\_\_

### 1. Magnitude of Responsibilities

A) Number of staff supervised? Directly: \_\_\_\_\_ Indirectly: \_\_\_\_\_

Authority: Approve (A) or Recommend (R) (Please circle one for each)

- approve vacation A R
- discipline A R
- hire/fire A R
- recommend wage changes A R
- approve overtime A R
- recommend changes to job description A R
- conduct/sign off performance appraisals A R
- delegate work A R

### B) Budget

- actual responsibility (as per job description) \$ \_\_\_\_\_
- spending authority \$ \_\_\_\_\_
- preparation of spending estimates A R
- monitoring A R
- recommendations for remedial action A R

### 2. Complexity of Job

A) Reports to (Title): \_\_\_\_\_

B) Working Relationships (**attach if not identified in job description**)\*\*  
Internal Departments (ie. CAO's Office)

\_\_\_\_\_  
\_\_\_\_\_

External Agencies (ie. Community Groups)

\_\_\_\_\_  
\_\_\_\_\_

C) Major Job Functions (**attach job description**)\*\*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Duration of Employment month: \_\_\_\_ year: \_\_\_\_ to month: \_\_\_\_ year: \_\_\_\_ (in this position)

**Update Fee: \$95.00 (HST Exempt)**

\*\*Fee only applies when requirements are met for increase in level of CMM or Enhancement\*\*