U.S. Department of Labor Bureau of Labor Statistics

Occupational Requirements Survey



The Bureau of Labor Statistics, its employees, agents, and partner statistical agencies, will use the information you provide for statistical purposes only and will hold the information in confidence to the full extent permitted by law. In accordance with the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. 3572) and other applicable Federal laws, your responses will not be disclosed in identifiable form without your informed consent. Per the Federal Cybersecurity Enhancement Act of 2015, Federal information systems are protected from malicious activities through cybersecurity screening of transmitted data.

This report is authorized by law, 31 United States Code §§ 1535/FAR 17.5 of the Economy Act. Your voluntary cooperation is needed to make the results of this survey comprehensive, accurate and timely.

O.M.B. #1220-0189

We estimate that it will take an average of 54 minutes to complete this form, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this information. If you have any comments regarding this estimate or any other aspect of this survey, including suggestions for reducing this burden, please send them to the Bureau of Labor Statistics, Office of Compensation and Working Conditions (1220-0189), 2 Massachusetts Avenue N.E., Washington, D.C. 20212. You are not required to respond to the collection of information unless it displays a currently valid OMB control number.

ESTABLISHMENT COLLECTION FORM FOR PRIVATE INDUSTRY (Work level and schedule)

Start Time/End Time:					
Address #_1					
Physical Address Personal Visit Address Mailing Address					
Schedule Number(#):					
Company Name:					
Secondary Name (Doing Business As):					
Address:					
City/State/ZIP:					
Address # 2. Physical Address Personal Visit Address Mailing Address					
Company Name:					
Secondary Name (Doing Business As):					
Address:					
City/State/ZIP:					
Establishment Officials (Contact List)					
# 1: Authorizing Supplying Title:					
Telephone #: E-mail:					
FAX #: Address: 1, 2, or COC. Mail forms to					
# 2: Authorizing Supplying Title:					
Telephone #: E-mail: FAX #: Address: 1, 2, or COC. Mail forms to					
# 3: Authorizing Supplying Title:					
Telephone #: Email:					
FAX #: Address: \[\begin{align*} \text{Address:} & \Boxed{\text{T}} & \text{QCC.} & \Boxed{\text{Mail forms to}} \]					

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Central Office Clearance (Complete if clearance and/or data obtained from this source)

	Clearance obtained:	Schedule (data) obtained:
j	Company Name:	
f	Address:	
f	City/State/ZIP:	
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	Remarks	
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COMPANY DATA

Establishment Information (current data)	Schedule #:
State:	Sample Number:
Assigned Employment:	Total Employment:
NAICS:	
Establishment Description:	
Product Description:	
Oallandian Information	
Collection Information Field Economist:	Method of Collection:
Collection Date:	Payroll Reference Date:
☐ Data obtained electronically	Document obtained (Secondary data source)
Written Permission: 🗌 Yes, 🗌 No	Name and Title of Official:
Date of Permission:	Permission on file at RO: Yes, No
Status (IDC Wage) Establishment Status:	Remarks:
☐ Usable ☐ Refusal	
Out of business	
Out of scope	
☐ No matching jobs	
Duplicate	
SMG Notification	Demontos
Reason: Ownership/NAICS change	Remarks:
☐ Part of assigned unit	
Collected unit larger than assigned	
Employment +/- 20% of assigned	+
Employment up – business fluctuations	
Sampled employment wrong	
SMG chose establishment subsample	
Overlap (set by system)	
Other discrepancy	

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Remarks	
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OCCUPATIONAL REQUIRE	MENTS SUR	RVEY - Leveling Schedule Number:
Quote: Occupation	n:	
Establishment Grade:		SOC:
Establishment Rate Range:		Establishment Job Title:
Non-supervisory☐ Lead☐	Supervisory <u></u>	
Factor	Level	Education, experience, other comments
KNOWLEDGE		· •
JOB CONTROLS AND COMPLEXITY		
CONTACTS		
PHYSICAL ENVIRONMENT		
Remarks		
-		

OCCUPATIONA	L REQUIREMENTS SU	IRVEY - Leveling Schedule Number:
Quote:	Occupation:	
Establishmen	t Grade:	SOC:
Establishmen	t Rate Range:	Establishment Job Title:
Non-supervise	ory⊡ Lead⊡ Supervisory	
Factor	Level	Education, experience, other comments
KNOWLEDGE		
JOB CONTROLS AN	ND	
CONTACTS		
PHYSICAL ENVIRO	NMENT	

OCCUPATIONAL	REQUIREMENTS SU	URVEY - Leveling Schedule Number:
Quote:	Occupation:	
Establishment G	Grade:	SOC:
Establishment F	Rate Range:	Establishment Job Title:
Non-supervisory	/☐ Lead☐ Supervisory	у□
Factor	Level	Education, experience, other comments
KNOWLEDGE		, , ,
JOB CONTROLS AND COMPLEXITY		
CONTACTS		
PHYSICAL ENVIRONM	MENT	

OCCUPATIONAL REQU		
Quote: Occu	pation:	
Establishment Grade:		SOC:
Establishment Rate Ra	ange:	Establishment Job Title:
Non-supervisory⊡ Le	ad⊡ Supervisory⊡	
ctor	Level	Education, experience, other comments
IOWLEDGE		
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ONTACTS		
YSICAL ENVIRONMENT		

OCCUPATIONAL REQUIR	REMENTS SUF	RVEY - Leveling	Schedule Number:	
Quote: Occupa	tion:			
Establishment Grade:		SC	OC:	
Establishment Rate Rang	ge:	Establishment J	ob Title:	
Non-supervisory⊡ Lead	☐ Supervisory			
Factor	Level	Education	n, experience, other comme	nts
KNOWLEDGE				
JOB CONTROLS AND COMPLEXITY				
CONTACTS				
PHYSICAL ENVIRONMENT				

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	SOC:
Establishme	ent Job Title:
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.evel Educ	cation, experience, other comments
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Quote: Occupat	ion:		
Establishment Grade:			
Establishment Rate Rang	e:	Establishment Job Title:	
Non-supervisory⊡ Lead[☐ Supervisory☐		
Factor	Level	Education, experience, other comments	
KNOWLEDGE			
JOB CONTROLS AND COMPLEXITY			
CONTACTS			
PHYSICAL ENVIRONMENT			

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OCCUPATIONAL REQUIR			
Quote: Occupati	on:		
Establishment Grade:		SOC:	
Establishment Rate Range	e:	Establishment Job Title:	
Non-supervisory⊡ Lead⊡	☐ Supervisory☐		
Factor	Level	Education, experience, other comments	
KNOWLEDGE			
JOB CONTROLS AND COMPLEXITY			
CONTRACTS			
PHYSICAL ENVIRONMENT			

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OCCUPATIONAL REQUIR Base Leveling Supervisor	EMENTS SURVEY –	Schedule Number:			
Supervisor					
-	_ine Supervisor/Manager				
Quote: Occupati	ion:				
Establishment Grade:					
Establishment Rate Rang		ment Job Title:			
Ç					
Highest Level Non-Supervisory Su	bordinate Position				
Factor	Level E	ducation, experience, other comments			
KNOWLEDGE					
JOB CONTROLS AND COMPLEXITY					
CONTACTS					
PHYSICAL ENVIRONMENT					
Remarks					

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Schedule Number: OCCUPATIONAL REQUIREMENTS SURVEY -Leveling on Duties and Responsibilities of Supervisor Supervisor 1^{st} \square 2^{nd} \square 3^{rd} \square Line Supervisor/Manager Quote: Occupation: Establishment Grade: _____ SOC: ____ Establishment Rate Range: Establishment Job Title: Factor Level Education, experience, other comments KNOWLEDGE JOB CONTROLS AND COMPLEXITY CONTACTS PHYSICAL ENVIRONMENT Remarks

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OCCUPATIONAL REQUIREMENTS SURVEY – Leveling Summary

Schedule Number:

Leveling Factors	QUOTE 1	QUOTE 2	QUOTE 3	QUOTE 4	QUOTE 5	QUOTE 6	QUOTE 7	QUOTE 8
KNOWLEDGE								
JOB CONTROLS AND COMPLEXITY								
CONTACTS								
PHYSICAL ENVIRONMENT								

Remarks	

OCCUPATIONAL REQUIREMENTS SURVEY - Work Schedule

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Schedule Number:	

Quote #	Work Schedule #	Description/occupation	Hours/day	Hours/week	Weeks/year	Туре

For "Work Schedule #" note also if Alternate work schedule (Only needed for index schedules)

Remarks	