

6 to 7	7 to E8	E8 to 9

## Maintenance Work Element Program

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### QUALIFICATION REQUIREMENT REPORT

Employee Name:	Employee ID Number:	Region:
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#### TMW 6 TO TMW 7 - 12 Work Elements Required - For Reallocation

##### REQUIRED KEY ELEMENTS - 6 REQUIRED

2000	2009	2018	2500	2501	2502 *
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##### ELECTIVE KEY ELEMENTS - 3 REQUIRED

2120	2142	2143	2151	2159	2160	2167	2168	2503	2505	2520	2561
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##### NON - KEY ELEMENTS

2101	2102	2103	2104	2105	2106	2112	2118	2126	2127	2137
2153	2164	2170	2504	2507	2524	2550	2560	2562	2567	

Employee has satisfactorily performed all necessary activities and has met all other Work Element Program requirements for reallocation from the TMW 6 level to the TMW 7 level. Reallocation is requested.

_____ Region Work Element Coordinator Signature/Date	_____ Supervisor Signature/Effective Date
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#### TMW 7 TO TMW E8 - 12 Work Elements Required - For Reallocation

##### REQUIRED KEY ELEMENTS - 4 REQUIRED

2142	2143	3018	3500
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##### ELECTIVE KEY ELEMENTS - 4 REQUIRED

3002	3142	3143	3151	3152	3160	3164	3167
3168	3169	3170	3171	3503	3520	3560	3567

##### NON - KEY ELEMENTS

3001	3101	3102	3104	3105	3106	3107	3108	3109	3110	3111	3117	3119
3120	3121	3122	3123	3128	3130	3131	3132	3136	3144	3145	3147	3149
3150	3153	3154	3155	3156	3157	3159	3162	3163	3165	3166	3172	3173
3174	3175	3177	3180	3183	3186	3187	3188	3189	3190	3191	3192	3193
3194	3196	3197	3501	3502	3504	3505	3506	3507	3509	3510	3511	3512
3513	3527	3539	3563	3564	3565	3566	3568	3569	3572			

Employee has satisfactorily performed all necessary activities and has met all other Work Element Program requirements for reallocation from the TMW 7 level to the TMW E8 level. Reallocation is requested.

_____ Region Work Element Coordinator Signature/Date	_____ Supervisor Signature/Effective Date
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\*Skid Steer (2505) can be substituted when the front loader is not available locally. If substituted 2505 may not be used as an Elective Element. This substitution must be approved through the appeal process.

# Maintenance Work Element Program QUALIFICATION REQUIREMENT REPORT

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Employee Name:	Employee ID Number:	Region:
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**TMW E8 TO TMW 9 - 4 Core Elements Needed For Reallocation (2 Required, 2 Elective)**

**REQUIRED CORE ELEMENTS (2) - 4600 - SIX Elements Listed Beneath Including 3197 are Required  
5680 - Five Elements Listed Beneath Including 5004 are Required**

4600	5680						
3002							
3018	5000						
3183	5001						
3192	5002						
3196	5003						
3197	5004	A	B	C	D	E	F
3500	5005	A	B	C			

**ELECTIVE CORE ELEMENTS (2) - 4601, 4630, 4650 - Minimum of Five Elements Per Core  
4640, 4660, 4680 - Minimum of Four Elements Per Core**

4601	4630	4640	4650	4660	4680
2101	2126	3142	3150	3160	4122
2112	2127	3143	3151	3162	4193
3101	2137	3144	3152	3163	4501
3102	3120	3145	3153	3164	4505
3104	3121	3149	3154	3167	4506
3105	3122		3155	3168	4511
3106	3123		3156	3169	4519
3108	3128		3157	3187	4523
3109	3130		3159	3188	4528
3110	3131		4018	3189	4540
3111	3170		4148	3190	4561
3117	3171		4158	3191	4568
3119	3172				4570
	3173				4586
	3175				
	3177				

Employee has satisfactorily performed all necessary activities and has met all other Work Element Program requirements to be eligible for a TMW 9 position.

_____ Region Work Element Coordinator Signature/Date	_____ Supervisor Signature/Effective Date
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