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| **Please use this form when:**  |  | **Requesting a New Position** |  | **Reclassification Audit:**  |  |  |

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| **Employee Information** |
| Employee Name: |  | Department: |  |
| Employee ID: |  | Supervisor Name: |  |
| Job Title:  |  | Supervisor Title: |  |
| Pay Grade:  |  | Date:  |  |

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| **Job Overview** |
| Provide a three to four sentence summary of the primary purpose of the job.  |
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| Describe how the job duties of this position are different from the job immediately above and or below. |
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| **Job Duties** |
| *Please provide a maximum of eight of job duties. Provide a percentage of time spent performing each duty. The total percentage of time should equal 100%. Finally, provide a description of the work product or the result of performing each job duty.* |
| **Primary Job Duties and Responsibilities (Essential Functions) \*:** Essential functions are the fundamental job duties performed in a position. A function may be essential because the position exists to perform that duty. Duties that require less than 5% of the job should not be listed. |

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| Job Duty: |  |
| Work Product:  |  |
| % of Time:  |  |

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| Job Duty: |  |
| Work Product:  |  |
| % of Time:  |  |

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| Job Duty: |  |
| Work Product:  |  |
| % of Time:  |  |

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| Job Duty: |  |
| Work Product:  |  |
| % of Time:  |  |

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| Job Duty: |  |
| Work Product:  |  |
| % of Time:  |  |

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| Job Duty: |  |
| Work Product:  |  |
| % of Time:  |  |

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| Job Duty: |  |
| Work Product:  |  |
| % of Time:  |  |

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| Job Duty: |  |
| Work Product:  |  |
| % of Time:  |  |

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| **Supervisory Responsibilities**  |
| *Please list the job title of each full or part-time position that this job supervises, either directly or indirectly (exclude students, Non-Student-Non-Regular (NSNR), Graduate Assistants, and any other non-regular staff.) Include the job title(s) and the number of staff supervised (headcount).* |
| Employment Status | Reporting Relationship | Job Title(s) | Headcount |
| Full Time | Direct Report |  |  |
| Indirect Report |  |  |
| Part Time | Direct Report |  |  |
| Indirect Report |  |  |

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| Indicate the level of supervision that this position provides by checking the responsibilities below, as appropriate. **Check here if this position does not supervise staff:** [ ]  |
|  | Interview job applicants |
|  | Make hiring recommendations |
|  | Make hiring decisions |
|  | Plan and/or schedule work for others |
|  | Assign or delegate work to others |
|  | Establish rules, procedures, and/or standards |
|  | Monitor work of others |
|  | Give instructions to others |
|  | Formally train others |
|  | Evaluate the work of others but do not sign formal performance appraisal forms |
|  | Complete and sign formal performance evaluations of others |
|  | Discipline others |
|  | Recommend promotion of others |
|  | Recommend demotion or discharge of others |
|  | Make promotion decisions |
|  | Make demotions or discharge decisions |
|  | Other (Explain): |

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| **Budget Responsibility**  |
| *If applicable, describe the budget responsibility this position holds by indicating the monetary amount and general fiscal responsibility as indicated below.* |
| Provide the amount of budget responsibility this position holds (estimate if exact value is unknown):  $ |
| Describe the fiscal responsibility this position holds: |

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| **Knowledge, Skills, and Abilities**  |
| *Please describe the knowledge, skills and abilities (KSAs) required to perform the duties of the position. KSA’s enable a person to perform the job duties of their position.* |
| **Knowledge: Please list the specific knowledge that the position requires.** |
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| **Skills: Please describe the skills that the position requires.** |
| Analytical: |  |
| Project/Process Management: |  |
| Technology: |  |
| Administrative Support: |  |
| Oral and Written Communication: |  |
| Interpersonal Skills: |  |
| Problem Solving: |  |
| Other: |  |
| **Abilities: Please list the specific abilities that the position requires.** |
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| **Education** |
| Required: |
| Preferred: |
| Additional Information (such as license, credential, certification, valid Driver’s License) If yes, provide the university policy, state or federal law, or statute in support of the credential): |

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| **Working with Others**  |
| *Many jobs require interaction with other employees, the general public, vendors, and other people. Please indicate the type of interaction required by this job.* |
| Indicate whether this position interacts with other university employees (internal) or people who do not work for the university (external). If neither apply, please leave blank. |
|  | Internal | External |
| Exchange routine, factual information and/or answer routine questions. |  |  |
| Exchange detailed information or resolve varied problems. |  |  |
| Access and/or work with sensitive and/or confidential information. |  |  |
| Identify needs/concerns of others and acceptance of ideas or collaborate on significant projects. |  |  |
| Resolve conflict, negotiate or collaborate on major projects. |  |  |
| Handle sensitive issues and facilitate collaboration at the highest level. |  |  |
| Develop and maintain relationships with key contacts to enhance work flow and work quality. |  |  |

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| **Supervision Received**  |
| *Please indicate the level of supervision that this position receives by selecting the appropriate level below.* |
|  | **Immediate Supervision:** You work in the presence of your supervisor or in a situation of close control and easy reference. Work assignments are given with explicit instructions or you have pre-established procedures to follow. You make few, if any, deviations from established practice without checking with your supervisor. |
|  | **General Supervision:** Your assigned duties require the exercise of judgment or choice among possible actions, sometimes without clear precedents and often with concern for the consequences of the action. You may or may not work in the presence of your supervisor. This is a very broad category. |
|  | **Moderate Direction:** You receive general instructions regarding the scope of the approach to projects or assignments, but the procedures and techniques to use are left to your discretion. This category is usually for technical and professional positions where employees operate with a reasonable degree of independence. |
|  | **General Direction:** You are responsible for a program or function and are expected to carry out necessary activities without direction except as new or unusual circumstances require. This category is usually reserved for office/section heads and above and for high-level staff employees. |
|  | **Administrative Direction:** You have broad management responsibility for a large program or set of related functions. You usually receive direction in terms of goals and are reviewed in terms of results - often only in relation to major problems. This category is usually reserved for Department/Division heads and above. |

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| **Discretion**  |
| *Please describe the level of discretion this position holds. Decision making, breadth of responsibility, problem solving, and independence of action all pertain to the level of discretion a position has.* |
| **Decision Making:** Provide examples of the decisions that this position routinely makes. |
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| **Breadth of Responsibility:** Describe the impact of the decisions made by this position on the department, division, or work unit. Also, please summarize the level of responsibility that the position holds. |
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| **Problem Solving:** Describe the problems that this position routinely solves or attempts to solve. |
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| **Independence of Action:** Indicate the level of independence that this position holds. |
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| **Work Environment**  |
| *Different jobs perform duties in a variety of working environments. Please indicate the work environment of this position, as indicated below.* |
| Indicate the number of hours spent in each working environment, as appropriate. | Level of Frequency(Indicate number of hours per day.) |
| **Office Environment:** Employees are protected from weather conditions or contaminants, but not necessarily occasional temperature change. |  |
| **Outdoor Environment:** Employees work outdoors and may not be protected from weather conditions. |  |
| **Extreme Cold:** Temperatures typically below 32 degrees for more than an hour. |  |
| **Extreme Heat:** Temperatures above 100 degrees for more than an hour. |  |
| **Noise:** There is sufficient noise to cause you to shout in order to be heard above the noise level. |  |
| **Vibration:** Exposure to oscillating movements of extremities or whole body. |  |
| **Hazards:** Includes a variety of physical conditions, such as proximity to moving mechanical parts, moving vehicles, electrical current, working on scaffolding and high places, or exposure to chemicals. |  |
| **Oils:** There is air or skin exposure to oils or other fluids. |  |
| **Infectious Diseases:** Employees are frequently exposed to contagious or infectious diseases. |  |
| **Exposure to Animals:** Working in laboratories with animals. |  |
| **Atmospheric Conditions:** Conditions that affect the respiratory system, such as fumes, odors, dusts, mists, gases, or poor ventilation. |  |
| **Close Quarters:** Employees are frequently required to work in crawl spaces, shafts, man holes, sewage and water line pipes, and other areas that could cause claustrophobia. |  |
| **Other:** |  |

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| **Physical Demands**  |
| *Different positions require a variety of physical demands. Please indicate below the number of hours spent performing duties in each working environment, as appropriate.* |
| Physical Demands | Level of Frequency(Indicate number of hours per day.) |  | Physical Demands | Level of Frequency(Indicate number of hours per day.) |
| Sitting |  | Crouching |  |
| Repetitive hand motion |  | Crawling |  |
| Hearing, listening |  | Balancing |  |
| Talking |  | Reaching overhead |  |
| Standing |  | Pulling, pushing |  |
| Walking |  | Shoveling |  |
| Bending |  |  | Lifting – up to 10lbs |  |
| Stooping |  | Lifting – up to 20lbs |  |
| Climbing stairs |  | Lifting – up to 30lbs |  |
| Climbing ladders |  | Lifting – up to 40lbs |  |
| Kneeling, squatting |  | Lifting – up to 50lbs |  |

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| **Travel Requirements** |
| *Different positions require an employee to travel. Please indicate the frequency of travel.* |
| Indicate the frequency and reason(s) for travel. |
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| **Additional Information** |
| Provide any other relevant, job related information here. |
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| Employee Signature: |  |  | Date:  |  |
| Employee Signature: |  |  | Date:  |  |