



INSTRUCTIONS: When completing this form, please ensure that your answers give a clear and concise understanding of the duties and responsibilities involved in this position. The information provided will play a critical role in job description development and job evaluation. Please attach an accurate organizational chart that includes this position. If you have any questions, please contact Human Resources.

GENERAL INFORMATION

Job profile title	Job profile	PIN
Agency name	Agency number	
Incumbent (employee) name	Employee ID	Date
Division	Department (and unit if applicable)	
Primary contact name	Phone	Email
Supervisor name	Supervisor title	PIN

QUESTIONS 1-14

1. Are you requesting the position be reallocated? ☐ Yes. ☐ No.

If no, proceed to Question 2.

If yes, what is the proposed job family?

2. **Position purpose:** Is there a job in the current job catalog that performs similar responsibilities? ☐ Yes. ☐ No.

If no, proceed to Question 3.

If yes, what is the job family/level?

Briefly state the principal purpose or focus of this position. You will have the opportunity to provide more detail in the next section. Describe the primary function of the position (**what** the position must accomplish) and its major objective (**why** that function is performed).

3. Primary duties: List the duties involved in this position in order of importance, starting with the most important. Describe the duties in specific terms that will be clear to someone who is not familiar with the work; avoid using jargon and acronyms. Describe the work assignments over a sufficiently long period of time to present a complete picture of the job. Estimate the percentage of time spent performing each duty. The listed percentages should add up to 100%.

Duties	% of time

4. Subordinate positions: Supervision includes approval of leave and completion of performance evaluations for employees (not including temporary employees).

Does this position supervise other employees? ☐ Yes. ☐ No.

If yes, do any of these employees supervise others? ☐ Yes. ☐ No.

Below, list the job titles and position identification numbers (PINs) of the positions that this position directly supervises:

Job titles	PINS

5. Subordinate responsibility: In the table below, indicate the nature and extent of the responsibility for employees under the supervision of this position.

Check all that apply to the job

<input type="checkbox"/> Plan work of others.	Hire new employees:	<input type="checkbox"/> Recommend	<input type="checkbox"/> Approve
<input type="checkbox"/> Distribute work to others.	Terminate employees:	<input type="checkbox"/> Recommend	<input type="checkbox"/> Approve
<input type="checkbox"/> Check work of others.	Promote employees:	<input type="checkbox"/> Recommend	<input type="checkbox"/> Approve
<input type="checkbox"/> Approve work of others.	Demote employees:	<input type="checkbox"/> Recommend	<input type="checkbox"/> Approve
<input type="checkbox"/> Train employees.	Discipline employees:	<input type="checkbox"/> Recommend	<input type="checkbox"/> Approve
<input type="checkbox"/> Evaluate performance.	Approve leave:	<input type="checkbox"/> Recommend	<input type="checkbox"/> Approve
<input type="checkbox"/> Establish unit policy/procedure.	Approve pay increases:	<input type="checkbox"/> Recommend	<input type="checkbox"/> Approve

6. Describe the general purpose and type of work performed by employees supervised by this position.

7. Fiscal responsibility: Provide dollar amounts for which this position has **direct** responsibility and accountability. State all figures on an annual basis. Estimated numbers are satisfactory.

Item	Amount
Annual personnel and operating budget for which you are directly responsible and held accountable	
Other:	

8. Principal challenges: Describe the nature and variety of both the most typical problems and the most complex problems this position faces, as well as any short- and long-term challenges.

9. Authority: What types of decisions does this position have the power to make without seeking approval, and what types of decisions must be referred to a superior?

Does this position have delegated authority? If yes, please elaborate.

Who assigns work to this position (name and title)?

What aspects of the work are checked or reviewed by others?

Who checks the work upon completion (name and title)?

Level of supervision or direction received in performing assigned duties (check one):

- ☐ Assignments are well detailed and well prescribed by the supervisor.
- ☐ Assignments are prescribed, but the methods are not typically reviewed nor controlled while the work is in progress.
- ☐ Position is free from both technical and administrative oversight while the work is in progress.
- ☐ Position is free from active technical control in planning and carrying out work responsibilities.
- ☐ Position is provided with technical and administrative freedom to plan, develop and organize all phases of the work necessary for its completion within broad program guidelines.

What kind of errors in judgment or performance can be made by this position?

What are the consequences if such an error or mistake is made?

10. Personal contacts: Describe the different types of people you must deal with in carrying out your work. Describe the purpose, nature and frequency of the contacts. Also, indicate whether these interactions occur in person, by email or by phone.

11. Work guidelines and confidentiality: List specific laws, regulations, instructions or procedures that must be used or followed in performing this job. Describe how they are used in this work.

Does this position work with information that is confidential in nature? ☐ Yes. ☐ No.

If no, proceed to Question 12.

If yes, list specific laws, regulations, instructions or procedures that apply to maintaining confidentiality.

12. Technology: What types of equipment (PC, laptop, etc.), applications (Word, Excel, etc.) or other technology are required for this position?

13. Minimum qualifications: What minimum level of education is required for the job? (Leave blank if not applicable.)

☐ High school diploma. ☐ Associate's degree. ☐ Bachelor's. ☐ Master's degree. ☐ Doctorate (Ph.D., J.D., etc.)

Area of study:

☐ License or certification (CPA, CCP, etc.):

How many years of experience are required for the minimum qualifications of the job? What type of experience?

Beyond the minimum qualifications indicated above for education and experience, are there any other preferred qualifications?

14. Knowledge, skills and abilities: Below, list the additional knowledge, special skills or behavioral competencies required to perform the essential responsibilities of the job.

Knowledge

Skills

Abilities

EMPLOYEE VERIFICATION

With my signature below, I am verifying the accuracy of the information I have provided on this form.

Employee signature

Date

SUPERVISOR COMMENTS AND VERIFICATION

Please provide any additional information regarding the duties and responsibilities involved in this position:

I have reviewed this form in its entirety, and I agree it is a complete, accurate and thorough reflection of the responsibilities and accountabilities of the described position.

Supervisor signature

Date

FOR HCM USE ONLY

Allocated to:

Date: