

STAFF POSITION QUESTIONNAIRE

Present Position Title: _____

Name of Incumbent: _____

Recommended Title (if different): _____

Department or Division: _____

Reports to: _____
Name of Supervisor

_____ Title

Prepared By: _____ Date _____

Approved By: _____ Date _____

PART I. DESCRIPTION OF POSITION

A. PURPOSE OF POSITION: State briefly, in one or two sentences, the principal purpose or function of this position.

B. PRINCIPAL ACTIVITIES AND RESULTS: List a series of brief statements which describe only the major activities and end results for which this position is held accountable. State how often these activities are performed. Begin each statement with a verb (develop, manage, operate, transcribe, etc.)

C. ASSIGNMENT, REVIEW AND APPROVAL OF WORK: Describe who assigns work, how instructions are provided. Who reviews and approves work in progress or when completed? Who handles the responsibilities of this position in the absence of the incumbent?

D. RESPONSIBILITY AND DECISION – MAKING AUTHORITY: Describe how decisions are made and who has the responsibility for making the decisions.

E. REPORT PREPARATION AND EQUIPMENT OPERATION: What records or reports are prepared and how often are these prepared? What equipment is utilized on a regular basis? Approximate how often the equipment is used. Who maintains the equipment?

F. RELATIONS WITH OTHERS: Describe contact with others, other than co-workers and immediate supervisor, as part of the job? What departments does the incumbent interface with on campus? What is the purpose of the contacts, and how often do they occur?

G. MAJOR OR UNUSUAL PROBLEMS: Briefly describe one of the most complex problems faced by the incumbent in this position and any unusual aspects which might make the position different from similar positions elsewhere. Describe only those problems that are critical to achieving the principal activities listed in B.

PART II. SCOPE OF POSITION

A. QUANTITATIVE DATA—PERSONNEL: List the titles or classifications of all employees reporting directly to this position in the first column and show the number of employees with that title or classification in the second column. In the last column indicate the number of employees reporting to the position shown in the left-hand column.

Reporting Directly to Position

Position Title	# of employees with Title or Class	# of employees Reporting thru position
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total number of personnel supervised	_____	
Total base payroll supervised, excluding overtime		_____ per year

B. OTHER QUANTITATIVE DATA: In this section indicate important scope data applicable to this job which will best describe its size or effect on the University. State all figures on an annual basis.

1. Dollar Measures—e.g., capital expenditures, value of production, research and development expenditures, accounts payable or receivable, advertising expense, volume of purchases, etc.

Item	Amount
_____	_____
_____	_____
_____	_____

2. Unit Measures—e.g., number of people directly assisted, number of programs developed, number of orders processed, volume of machinery maintained, etc.

Item	Amount
_____	_____
_____	_____
_____	_____

3. Total operating budget for which this position is accountable: \$ _____ per year

4. Any other scope measurements pertinent to this job:

Item	Amount
_____	_____
_____	_____
_____	_____

PART III. KNOWLEDGE AND SKILL REQUIREMENTS

A. In column (I) estimate the minimum requirements of education, knowledge and previous experience necessary for an individual to be considered for this position. Do not enter the qualifications of present incumbents of this position unless they coincide with the minimum requirements of the position. In column (II) state additional characteristics that are desirable, but not absolutely essential, for an individual to start this position.

(I) Minimum

(II) Desirable but not essential

1. Education:

_____	_____
_____	_____
_____	_____
_____	_____

2. Specialized or Technical Knowledge (Include software if applicable)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

3. Kind and Length of Experience

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

B. How long will it take an incumbent with the aforementioned minimum qualifications to become proficient in this position?

PART IV. GENERAL

Describe anything else of significance, which is important to the position and not covered elsewhere. For example, special assignments, committees and outside organizations required by the job, geographic areas covered, or anything else which you believe to be significant.

NOTE: NO POSITION QUESTIONNAIRE IS COMPLETE WITHOUT AN ORGANIZATIONAL CHART.

Below is an organization chart format. Please complete as indicated. When completed, the chart will show the position to which this position directly reports, those positions (if any) which report directly to this position, and positions which report to the supervisor of this position.

1. Block #1 - Title of this position; name if filled.
2. Block #2 - Title and name of your immediate supervisor.
3. Block #3 - Your supervisor's immediate supervisor - title and name.
4. Block #4 - Positions on the same level as this position - title and name.
5. Block #5 - Number of employees under direct supervision of this position.

3. Title: Name:

2. Title: Name:

4. Title: Name:	1. Title: Name:	4. Title: Name:
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5. Clerical No. of _____	5. Tech. - Svc. No. of _____	5. Admin. Or Prof. No. of _____	5. Supv. No. of _____
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PHYSICAL DEMANDS (ADA COMPLIANCE)

A. How much on-the-job time is spent in the following physical activities? Show the amount of time by checking the appropriate boxes below.

	Amount of Time			
	None	Up to 1/3	1/3 to 2/3	2/3 or more
Stand				
Walk				
Sit				
Talk or hear				
Use hands to finger, handle or feel				

Climb or balance
 Stoop, kneel, crouch, or crawl
 Reach with hands and arms
 Taste or smell

B. Does this position require that weight is lifted or force is exerted? If so, how much and how often?
 Check the appropriate boxes below.

Amount of Time

Up to 10 pounds
 Up to 25 pounds
 Up to 50 pounds
 Up to 100 pounds
 More than 100 pounds

	None	Up to 1/3	1/3 to 2/3	2/3 or more

C. Does this position have any special vision requirements? Check all that apply.

- Close Vision (clear vision at 20 inches or less)
- Distance Vision (clear vision at 20 feet or more)
- Color Vision (ability to identify and distinguish colors)
- Peripheral Vision (ability to observe an area that can be seen up and down or to the left and right while eyes are fixed on a given point)
- Depth Perception (three-dimensional vision, ability to judge distances and spatial relationships)
- Ability to Adjust Focus (ability to adjust the eye to bring an object into sharp focus)
- No Special Vision Requirements.

D. State any comments or notes on the specific position duties that require the physical demands selected above.

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Date Position Evaluated: _____ Hay points: True _____ Adjusted _____ OverTime Status: Non-exempt _____ Exempt _____

Position Title: _____

Salary Range: Minimum _____ Midpoint _____ Maximum _____

Signature (HR Representative) _____ Date _____