

Formal Job Title _____

Name _____ Work Telephone Number _____

Functional Job Title (What your job is usually called) _____

Department _____ Date _____

Normal Work Hours _____ Work Location _____

Name and Title of Supervisor _____

PURPOSE

This Questionnaire will help the Office of Human Resources to obtain a detailed description of your duties and responsibilities. This information will be used to properly classify the job.

INSTRUCTIONS

Read through the entire Questionnaire before answering any questions. It will make filling out the Questionnaire easier and faster.

- Some questions may not apply to your job. Write in an "N/A" or place a "O" in the response space for these questions. Do not just leave the question blank.
- Answer the questions as accurately as possible for your job. Do not overstate or understate your answers. Think of your job duties over a period of time (e.g., 3 months, 6 months, 1 year) as you answer the questions. If the position is vacant or is a new position, think of the job duties after the position has been filled for a number of months.
- Write on the back of any page if you need more space.
- Make your answers short and clear. Use common words that can be understood by a person who may not work in your department.
- Please write or print clearly or type, if you prefer. The form is also available on disk.
- Sign your name and the date on the last page to show that you completed this Questionnaire and believe that it is an accurate description of your job.
- Pass the completed Questionnaire to your supervisor to look over, make comments on the last page, and sign. You are encouraged to discuss your answers with your supervisor.

1. PURPOSE/OBJECTIVE OF JOB

A. Summarize what your section does and how your job fits into that function.

B. Briefly describe or summarize the purpose of your job. What do you work on, what do you produce, what service do you provide, and so on.

2. SPECIFIC JOB DUTIES

List the major duties of your position. Normally six to twelve major duties make up a job. These are the duties that you perform on a regular basis. Begin with the most important duties and be sure to include those activities most descriptive of your job. On the right, indicate the usual amount of time you spend on each duty.

<u>A. Work Performed Every or Almost Every Workday</u>	<u>Percentage of Time</u>
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<u>B. Major Tasks Performed Periodically</u>	<u>Frequency/No. of Hrs.</u>
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3. WHAT, IN YOUR OPINION, IS THE MOST DIFFICULT PART OF YOUR JOB?

4. INFORMATION

How much time do you spend gathering information from the sources listed below in order to perform your job?
(Answer in terms of hours per day.)

- _____ 1. Written text materials (reports, memos, manuals, signs, books, computers, etc.)
- _____ 2. Verbal instructions/information (from your supervisor, co-worker, faculty, etc.)
- _____ 3. Quantitative materials (numbers taken from sources such as graphs, tables, specifications, accounts, etc.)
- _____ 4. Mechanical objects (looking at/reading dials, gauges, meters, machines, equipment, etc.)
- _____ 5. Observation of other people (co-workers, public, students, etc.)
- _____ 6. Other ways you get information to do your job (please give examples.)

5. DECISION-MAKING/INDEPENDENT JUDGMENT, ACTION OR INITIATIVE

To what extent does your position require you to make decisions in the absence of guidance or approval? *Check the statement that most closely describes your position.*

- 1. My work is performed under close supervision or by following specific and detailed instruction and/or procedures.
- 2. My position is performed in accordance with existing procedures and instructions. I set priorities, organize my work, and occasionally deviate from established schedules or procedures to accomplish results.
- 3. Some of my work is performed by following existing procedures and instructions but I receive other assignments.
- 4. My work typically involves projects and/or assignments wherein I have considerable decision-making authority regarding procedures, plans and schedules.
- 5. I make decisions within the context of approved goals and budgets. I have substantial latitude of independent action in establishing plans, policies and procedures within my functional area.
- 6. I establish goals, plans and policies for my own areas of responsibility subject to top management review. I have broad latitude for decision-making.

Describe one or two of the more important decisions you have made in the past 12 months.

6. EDUCATION/TRAINING

What is the minimum level of education and/or training required for your position?

- 1. The ability to read, write and speak one language and to perform simple arithmetic calculations.
- 2. Graduation (or equivalent) from high school.
- 3. A high-school level of education plus specialized knowledge which can be acquired in high school or a year or less of specialized training (e.g., PC word processing, spreadsheets, etc.)
- 4. One to three years of post-high school training (e.g. associate's degree or specific trade license).
- 5. A bachelor's degree.
- 6. A year or two of post-bachelor's degree education or training (e.g., a master's degree).
- 7. Three or more years of post-bachelor's degree training (e.g., a Ph.D.).

Other training

Comments

7. EXPERIENCE REQUIRED

A. At a minimum, how much work experience would someone need in order to perform your position satisfactorily?

- | | |
|--|--|
| <input type="checkbox"/> Less than one year | <input type="checkbox"/> Five to ten years |
| <input type="checkbox"/> One to three years | <input type="checkbox"/> More than 10 years experience |
| <input type="checkbox"/> Three to five years | |

B. If you were selecting a person to fill this position, what type of education, experience and/or skills would be required? List any professional licenses, special licenses or certificates needed to perform this job. *Indicate by federal, state or local law, or by employer.*

Comments

8. HOW MUCH ON-THE-JOB TRAINING IS REQUIRED TO LEARN THIS JOB?

- | | |
|--|---|
| <input type="checkbox"/> None | <input type="checkbox"/> 3-6 months |
| <input type="checkbox"/> 1-2 weeks | <input type="checkbox"/> 6 months to 1 year |
| <input type="checkbox"/> 2 weeks up to 1 month | <input type="checkbox"/> 1-3 years |
| <input type="checkbox"/> 1-3 months | <input type="checkbox"/> More than 3 years |

9. COMMUNICATION SKILLS REQUIRED

What level of communication skills does your position require? Consider listening, reading, speaking and writing skills. The communication may be in person, by telephone or through written documents.

- Basic. My position requires the ability to exchange information on factual matters, understand and give instructions, and perform other duties which require a basic level of listening, reading, speaking and writing skills.
- Moderate. My work requires greeting callers and visitors, answering factual questions from customers and others about the university, and other activities requiring good listening skills and tact.
- Significant. My position requires drafting correspondence; proofreading correspondence for spelling, grammar and content errors; training or instructing employees in my own department; and/or other tasks requiring a significant level of communication skills.
- Substantial. My work requires ordering services or supplies from approved vendors, explaining university policies in difficult situations, writing and editing reports and technical documents, coordinating the work of others, and/or other activities requiring a comparable level of communication skills.
- High. My position requires regularly negotiating major purchases or financial donations with companies or individuals, writing proposals, planning, supervising and appraising work of others, interpreting Florida Tech policies in situations requiring judgment and persuasion, or other activities requiring a comparable level of communication skills.
- Very High. I regularly write and present management education programs, negotiate contractual relationships between Florida Tech and important companies or individuals, and/or perform other duties requiring the highest level of communication skills.

Comments

10. CONFIDENTIALITY

Does your job require you to deal with confidential information?

- None
- Handle confidential information
- Handle highly sensitive and/or confidential information.

Examples

11. CONTACT WITH PEOPLE

A. How much of your day is spent in job-related contacts with people? _____

B. Typically workers come into contact with and deal with different kinds of people as they perform their jobs. List the kinds of people you come into contact with by job title in order of amount of time you spend with each of them.

For example, an administrative secretary may make the following list:

1. Faculty members
2. Own supervisor
3. Other secretaries
4. Students
5. General Public

12. ACCOUNTABILITY FOR WORK OF OTHERS

Which of the following best describes your responsibilities as a supervisor? To qualify as a supervisor, you must sign performance evaluations. If you don't, go to item 13. WORK DIRECTION.

- Occasional direction of other employees.
- Regular direction without hire/fire authority.
- Primarily responsible for appraising staff, determining pay increases, and hiring/firing, or recommending pay increases, hire or fire.
- Develop policies and budgets for my employees.
- Develop and oversee university-wide goals, strategies and plans.

A. How many people do you directly supervise? _____

List job titles

How many of these supervise others? _____

How many people do they supervise? _____

List job titles

13. WORK DIRECTION

This question relates to lead worker duties. A lead worker must be appointed to monitor the work of one or more persons and be responsible for the work they perform.

Are you a lead worker? Yes No If "YES," how many people do you lead on a regular basis? _____

List job titles

14. RESPONSIBILITIES

A. Are you responsible for the safety of others? Yes No If so, describe the circumstances.

B. List any material or dollar resources that you control or monitor. Indicate the approximate value, size or quantity of each type of resource.

<u>Resources</u>	<u>Value/Size/ Quantity</u>	<u>Type of Control/ Monitoring</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

15. COMMENTS

Briefly provide any additional information about your job not addressed in the above questions.

Employee Signature _____ Date _____

REVIEW/APPROVAL BY IMMEDIATE SUPERVISOR

Comments, exceptions or additions to any of the answers to the above questions. *(Write N/A if not applicable.)*

Supervisor Signature and Title _____ Date _____

Provost/VP Signature _____ Date _____