

Position Description Questionnaire

Updated As Of: _____

To the Employee: This written information is of great value in understanding and evaluating the duties and responsibilities of the job which you presently hold. These questions should assist you in describing your work and clearly explaining your duties.

Management and HR Services: Read the questions carefully and try to answer so that anyone who does not know the job can understand what you do. Think and write in terms of what you do and how and why you do it. Specific examples and samples of your tasks will be helpful.

Name	Last	First	Middle	Position Control # (To be filled out by Human Resources)
Present Class Title				Organization/ Department
Name/Title of Immediate Supervisor				Division/Section
Building Location				Telephone Number
How long have you been in this job?				Regular Hours of Work
How long have your duties been the same?				Regular Days of Work

SALARY VS. HOURLY

- Supervision of Others YES NO # OF EE _____
- Teaching Duties YES NO % of time _____
- Off Campus Sales Function YES NO % of time _____
- Perform Office, Non Manual work YES NO % of time _____

What is the primary purpose of your job? Describe the role of your job, how it is performed, and the specific areas or functions for which you are responsible.

List the Major functional elements of your job. Under each, describe the required duties, tasks and responsibilities of the work assigned. In the small left hand column, indicate the percent of time you spend in each functional element.

% of time	
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% of time



To the Supervisor: Please review the answers of the employee for completeness and accuracy. Do NOT change any answers without discussing with the employee. If you and the employee cannot agree, please give your opinion on another sheet of paper and identify clearly the points of disagreement.

Give the answers to the following questions below. *Keep the position in mind, not the current employee.* Try to pretend the position is vacant as you answer these questions. If you need more space, please use additional sheets of paper.

1. What knowledge's, skills and abilities are required in this position?
2. What educational background is needed to perform these duties and responsibilities? What kind and how many years of work experience are needed?
3. Is a license or certificate required? What kind and type?
4. List the most important tasks in the job? Why?
5. Explain the nature and type of supervision, review and monitoring you do of this position.

Supervisor's Signature

Date

To the Department Director, if applicable: Review this description and make any clarifications you feel necessary on a separate sheet of paper.

**Supplemental Information to Assist Organizations
In their Compliance with the Americans with Disabilities Act (ADA)**

**Checklist for Physical Activities and Requirements, Visual Acuity, and Working
Conditions of the Position**

**1. The physical activity of this position.
(Please check ALL blocks that apply)**

- | EE | SUP | (EE – Employee, SUP – Supervisor) | |
|--------------------------|--------------------------|-----------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | A. | Climbing: Ascending or descending ladders, stairs, scaffolding, ramps, poles and the like, using feet and legs and/or hands and arms. Body agility is emphasized. This factor is important if the amount and kind of climbing required exceeds that required for ordinary locomotion. |
| <input type="checkbox"/> | <input type="checkbox"/> | B. | Balancing: Maintaining body equilibrium to prevent falling when walking, standing or crouching on narrow, slippery or erratically moving surfaces. This factor is important if the amount and kind of balancing exceeds that needed for ordinary locomotion and maintenance of body equilibrium. |
| <input type="checkbox"/> | <input type="checkbox"/> | C. | Stooping: Bending body downward and forward by bending spine at the waist. This factor is important if it occurs to a considerable degree and requires full use of the lower extremities and back muscles. |
| <input type="checkbox"/> | <input type="checkbox"/> | D. | Kneeling: Bending legs at knee to come to a rest on knee or knees. |
| <input type="checkbox"/> | <input type="checkbox"/> | E. | Crouching: Bending the body downward and forward by bending leg and spine. |
| <input type="checkbox"/> | <input type="checkbox"/> | F. | Crawling: Moving about on hands and knees or hands and feet. |
| <input type="checkbox"/> | <input type="checkbox"/> | G. | Reaching: Extending hand(s) and arm(s) in any direction. |
| <input type="checkbox"/> | <input type="checkbox"/> | H. | Standing: Particularly for sustained periods of time. |
| <input type="checkbox"/> | <input type="checkbox"/> | I. | Walking: Moving about on foot to accomplish tasks, particularly for long distances or moving from one work site to another. |
| <input type="checkbox"/> | <input type="checkbox"/> | J. | Pushing: Using upper extremities to press against something with steady force in order to thrust forward, downward or outward. |
| <input type="checkbox"/> | <input type="checkbox"/> | K. | Pulling: Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion. |
| <input type="checkbox"/> | <input type="checkbox"/> | L. | Lifting: Raising objects from a lower to a higher position or moving objects horizontally from position-to-position. This factor is important if it occurs to a considerable degree and requires the substantial use of the upper extremities and back muscles. |
| <input type="checkbox"/> | <input type="checkbox"/> | M. | Fingering: Picking, pinching, typing or otherwise working, primarily with fingers rather than with the whole hand or arm as in handling. |
| <input type="checkbox"/> | <input type="checkbox"/> | N. | Grasping: Applying pressure to an object with the fingers and palm. |
| <input type="checkbox"/> | <input type="checkbox"/> | O. | Feeling: Perceiving attributes of objects, such as size, shape, temperature or texture by touching with skin, particularly that of fingertips. |
| <input type="checkbox"/> | <input type="checkbox"/> | P. | Talking: Expressing or exchanging ideas by means of the spoken word. Those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly. |
| <input type="checkbox"/> | <input type="checkbox"/> | Q. | Hearing: Perceiving the nature of sounds at normal spoken word levels with or without correction. Ability to receive detailed information through oral communications, and to make fine discriminations in sound, such as when making fine adjustments on machined parts. |
| <input type="checkbox"/> | <input type="checkbox"/> | R. | Repetitive motions: Substantial movements (motions) of the wrists, hands, and/or fingers. |

**2. The physical requirements of this position.
(Please check ONLY ONE block)**

EE SUP

(EE – Employee, SUP – Supervisor)

- A. Sedentary work: Exerting up to 10 pounds of force occasionally and/or a negligible amount of force frequently or constantly to lift, carry, push, pull or otherwise move objects, including the human body. Sedentary work involves sitting most of the time. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met.
- B. Light work: Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or negligible amount of force constantly to move objects. If the use of arm and/or leg controls requires exertion of forces greater than that for Sedentary Work and the worker sits most of the time, the job is rated for Light Work.
- C. Medium work: Exerting up to 50 pounds of force occasionally, and/or up to 20 pounds of force frequently, and/or up to 10 pounds of force constantly to move objects.
- D. Heavy work: Exerting up to 100 pounds of force occasionally, and/or up to 50 pounds of force frequently, and/or up to 20 pounds of force constantly to move objects.
- E. Very heavy work: Exerting in excess of 100 pounds of force occasionally, and/or in excess of 50 pounds of force frequently, and/or in excess of 20 pounds of force constantly to move objects.

**3. The visual acuity requirements including color, depth perception and field of vision.
(Please check ONLY ONE of the blocks to the left of letters A,B,C, or D)**

- A. The worker is required to have close visual acuity to perform one or more of the following: (*check all of the following which apply.*) preparing and analyzing data and figures; accounting; transcription; computer terminal; extensive reading; visual inspection involving small defects, small parts, operation of machines (including inspection); using measurement devices; assembly or fabrication of parts at distances close to the eyes.
- B. The worker is required to have visual acuity to perform one or more of the following: (*check all of the following which apply.*) operates machines such as lathes, drill presses, power saws and mills where the seeing job is at or within arm's reach; performs mechanical or skilled trades tasks of a non-repetitive nature such as carpenters, technicians, service people, plumbers, painters, mechanics, etc.
- C. The worker is required to have visual acuity to be the operator of trucks, forklifts, cranes and other equipment.
- D. The worker is required to have visual acuity to determine the accuracy, neatness, and thoroughness of the work assigned (i.e. custodial, food services, general laborer, etc.)

**4. The conditions the worker will be subject to in this position.
(Please check ALL that apply)**

- A. The worker is subject to inside environmental conditions: Protection from weather conditions but not necessarily from temperature changes.
- B. The worker is subject to outside environmental conditions: No effective protection from weather.
- C. The worker is subject to both environmental conditions: Activities occur inside and outside.
- D. The worker is subject to extreme cold: Temperatures below 32 degrees for periods of more than one hour.
- E. The worker is subject to extreme heat: Temperatures above 100 degrees for periods of more than one hour.
- F. The worker is subject to noise: There is sufficient noise to cause the worker to shout in order to be heard above the ambient noise level.
- G. The worker is subject to vibration: Exposure to oscillating movements of the extremities or whole body.
- H. The worker is subject to hazards: includes a variety of physical conditions, such as proximity to moving mechanical parts, electrical current, working on scaffolding and high places, exposure to high heat or exposure to chemicals.
- I. The worker is subject to atmospheric conditions: One or more of the following conditions that affect the respiratory system of the skin: Fumes, odors, dusts, mists, gases or poor ventilation.
- J. The worker is subject to oils: There is air and/or skin exposure to oils and other cutting fluids.
- K. The worker is required to wear respirator.
- L. The worker frequently is in close quarters, crawl space, shafts, man holes, small enclosed rooms, small sewage and water line pipes, and other areas which could cause claustrophobia.
- M. The worker is required to function in narrow aisles or passage ways.
- N. None: The worker is not substantially exposed to adverse environmental conditions (such as in typical office or administrative work).

5. Occupational exposure to blood (OSHA requirement)

(Please check if the following applies)

EE SUP

(EE – Employee, SUP – Supervisor)

A. The worker is in contact with blood during the performance of his/her duties. If so, please list below examples of duties in which possible exposure to blood occurs.

- 1.
- 2.
- 3.
- 4.
- 5.

Employee's Signature

Date

Supervisor's Signature

Date

Department or Division Director's Signature

Date