
SECTION 3. DESCRIPTION OF DUTIES

List the duties of the position, indicating the average percentage of time normally devoted to each duty. A job duty may be determined as **Essential** when one or more of the following apply:

1. The position exists primarily to perform the duty and the absence of the duty would alter the job;
2. The number of other employees among whom the performance of the job duty can be distributed is limited;
3. The duty requires a highly specialized skill, expertise, or ability to be performed.

% of
Time

ESSENTIAL DUTIES

% of
Time

SECONDARY DUTIES

SECTION 4. WORKING CONDITIONS

Describe special working conditions, if any, that are a regular part of this job. Include frequency of exposure to these conditions.

SECTION 5. GUIDELINES

a. List any established guidelines used to do this job, such as state or federal laws or regulations, policies, manuals, or desk procedures.

b. How are these guidelines used to perform the job?

SECTION 6. WORK CONTACTS

With whom must this position regularly come in contact (do not include co-worker within unit)?

Who Contacted

How

Purpose

How Often?

SECTION 7. JOB-RELATED DECISION MAKING

Describe the kinds of decisions likely to be made by this position. Indicate affect of these decisions where possible.

SECTION 8. REVIEW OF WORK

Who reviews the work of this position? (List job title and position number.) How? How often? Purpose of the review?

SECTION 9. ADDITIONAL JOB-RELATED INFORMATION

Any other comments that would add to an understanding of this position:

SPECIAL REQUIREMENTS: List any special recruiting qualifications for this position:

BUDGET AUTHORITY: If this position has authority to commit PSU operating money, indicate in what area, how much (biennially) and type of funds:

SECTION 10. ORGANIZATIONAL CHART

Attach a current organizational chart. Include: Employee; employee's supervisor; next level of supervision above the employee's supervisor; and other employees who report to the employee's supervisor.

Employee Signature Date

Supervisor Signature Date

Department Chair, Director, other reviewer (optional) Date

Human Resources Signature Date