

# CITY OF GRAND JUNCTION JOB ANALYSIS QUESTIONNAIRE

**I. EMPLOYEE BACKGROUND:** In this section you will provide information regarding your name, current job title, your immediate supervisor, etc. This will help us make sure we refer to the correct job throughout the study.

Is this a group questionnaire? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, please list all employee names.
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**Division:** Budget & Accounting

**Department:** Finance

## For Individual Questionnaires Only:

<b>Employee Name:</b>	Mason	Nicole	L
	(Last)	(First)	(Middle Initial)

**Current Classification Title:** Payroll Technician

<b>Division</b>	Financial Operations	<b>Department</b>	Administration
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**Total Length of Time with organization** 5 Years 2 months

**Total Length of Time in Current Position** 3 Years months

**Assigned Hours/Week:: from** 7:30 a.m. **t o** 4:30 p.m. **Assigned Days/Week** 5

**Email:** nicolem@gjcity.org

**Work Phone:** 970-244-1518

### Immediate Supervisor:

### Immediate supervisor reports to:

**Name:** Sonya Stockert

**Name:** Jay Valentine

**Title:** Accounting Supervisor

**Title:** Assistant Finance Manager

**Work Phone** 970-244-1522

**Work Phone:** 970-244-1517

**E-mail:** sonyas@gjcity.org

**E-mail:** jayva@gjcity.org

## **II. POSITION INFORMATION**

**1. POSITION SUMMARY:** This section asks for a short paragraph, one to three sentences, regarding the purpose of your position and/or your primary responsibilities. This summary helps us to quickly understand the essence of your job. Usually it is better to write this after you have completed the remainder of the questionnaire. Briefly describe what you consider to be the major purpose or objective of the job. Simply stated, what are you attempting to accomplish in your position?

Example: Computer Support Technician

Summary: To operate, maintain and repair computer equipment and to provide technical assistance to users.

Perform technical accounting and clerical duties in the preparation and processing of the City's centralized payroll program. The ability to ensure compliance with payroll rules and guidelines. Maintain a variety of accounting and payroll records, spreadsheets and files. Provide assistance and guidance regarding any and all payroll issues to City departments, including Supervisors and Managers. Must be able to work independently, with little supervision.

## 2. SUPERVISION & ORGANIZATIONAL RELATIONSHIPS.

- a. The chart below asks for your specific supervisory responsibilities. If a duty statement applies to you, please check the box under the "Yes" column and then indicate the number of employees for which you are responsible to the right of the statement.

Yes	Duty	Number of Employees
<input checked="" type="checkbox"/>	I do not officially supervise other employees (sign performance reviews).	
<input type="checkbox"/>	I evaluate and sign performance reviews of other full-time employees.	
<input type="checkbox"/>	I evaluate and sign performance reviews of part-time, temporary or contract employees.	
<input checked="" type="checkbox"/>	I instruct other employees in methods or procedures needed to carry out their job (how to carry-out their assigned duties).	53
<input type="checkbox"/>	I make work assignments for others.	
<input type="checkbox"/>	I make hiring and hiring pay recommendations.	
<input type="checkbox"/>	I make hiring and hiring pay decisions.	
<input type="checkbox"/>	I recommend termination for poor performance.	
<input checked="" type="checkbox"/>	I provide advice to peers that they must consider carefully before making a decision.	53
<input checked="" type="checkbox"/>	I provide information to supervisors/management that they use in making a decision.	10

- b. Complete the organization chart below. This chart will help us to understand your job in relation to others in your department. Please use titles and not names. Fill in the applicable position titles: (1) your coworkers, employees you work with and who also report directly to your supervisor; and, (2) your subordinates, any employees you supervise directly. List only those jobs over which you have full managerial/supervisory authority (i.e. complete and sign performance evaluation.) Do not list employees supervised by your subordinate supervisors.

### YOUR COWORKERS' JOB TITLES

Account Technician
Accountant Analyst

### YOUR DIRECT REPORTS' JOB TITLES


Please indicate the nature of the group supervised and the number supervised

☒ Full Time      ☐ Part-Time      ☐ Seasonal/Temp      ☐ Volunteer      ☐ Contract

c. Describe with whom, or with what departments/organizations, you have regular contact.

**1. Inside your organization (other City Departments):**

Title of Person or Department	How Often	For What Purpose
Ex: Peers, Subordinates		
Peers	Daily	Payroll questions
City Manager	Monthly	Legal questions regarding payroll and garnishments
Supervisors	Daily	Payroll issues
Human Resource Manager	Monthly	Payroll issues
Human Resource Supervisor	Daily	Payroll questions

**2. Outside your organization:**

Title of Person or Organization	How Often	For What Purpose
Ex: Vendors, Gen. Public		
Vendors	Weekly	Payments on employee services
General public	Monthly	Payroll questions on employees
Banking employees	Weekly	Payroll issues

**3. ESSENTIAL DUTIES.**

The list of essential duties helps us to understand those duties which are the primary reasons why your position exists. For clarification, please refer to the examples provided below.

**Essential Duties:** Those duties that make up at least 5% of your time. Please provide enough detail so that someone who may not be familiar with your job will have a clear understanding of what it is that you do. For example, do not simply state "prepares reports", but state "prepares reports such as status reports, staff reports", or other type of report(s) you may prepare. Also, please use action verbs such as prepares, calculates, operates, etc., to start off each statement. Do not use acronyms in your description. Examples are shown below. Use additional sheets if needed.

**Decisions Required:** List the decisions you make to carry out the essential duties.

**Frequency:** Indicate how often you perform each duty – D = daily, W = weekly, M = monthly, Q = quarterly, A = annually, or O = occasionally.

**Percent of Time:** Indicate how much of your time you spend on each task. The total of these percentages **should not be more than 100%**. Example: Sally conducts property value estimates 20% of the time, it may mean she spends one day out of five on that task, or that she spends around two hours each day. These need only be estimates so do not spend a great deal of time trying to come up with an exact percentage. The percentages of **all** duties should equal 100% over a one year period of time.

***Attach additional sheets if necessary.***

**E X A M P L E (LIST ACTUAL ESSENTIAL DUTIES BELOW EXAMPLE)**

Essential Duties	Decisions Required	Frequency	% of Time
<b>EXAMPLES:</b>			
<i>Prepares monthly newsletters by gathering information, writing copy, editing, preparing for publication and overseeing distribution.</i>	<i>Articles to include, editorial changes, graphics, layouts</i>	<i>M</i>	<i>25%</i>
<i>Performs inventory spot checks and monthly counts of supplies in warehouse.</i>	<i>When to check supplies</i>	<i>M</i>	<i>10%</i>

	List of Essential Duties	Decisions Required	Frequency: D = Daily W = Weekly M = Monthly Q = Quarterly A = Annually O = Occasionally	% of Time Spent (Not to exceed 100%)
1	Creating and sending payment file for employee Retirement plans		Weekly	3
2	Issuing manual payroll checks		Daily	5
3	Making accounts payable payments for employee services, ie garnishments, donations, wage assignments		Weekly	3
4	Maintaining flexible spending health and dependent accounts		Weekly	7
5	Making payments from flexible spending accounts		Weekly	2
6	Processing payroll for 950 employees		Weekly	33
7	Monitor employee leave balances		Weekly	1
8	Answer employee payroll questions		Daily	30
9	Create direct deposit file and send to bank		Weekly	1
10	Print payroll checks		Weekly	1
11	Maintain weekly, quarterly and yearly tax reports and issue payroll tax payments.		Weekly	2
12	Complete quarterly 941 report		Quarterly	1
13	Complete quarterly unemployment report		Quarterly	1
14	Create and enter journal entries		Weekly	2
15	Prepare and maintain accurate and confidential records and reports for employee garnishments.		Weekly	3
16	Reconcile liability accounts		Monthly	5
17	Communicate clearly and concisely, both orally and in writing.		Select	
18			Select	
19			Select	

#### 4. REQUIRED KNOWLEDGE AND SKILLS.

This section helps us to understand the types of knowledge and skill you would need to perform your job at the entry level. Those items you list are those required and not what you might necessarily know or are able to do after being in the position for a number of years.

**Knowledge:** refers to the possession of concepts and information gained through experience, training and/or education and can be measured through testing.

**Skills:** refers to the proficiency which can be demonstrated and are typically manual in nature and/or can be measured through testing.

The knowledge and skills that you list in the following section must refer to the Essential Duties you listed in Section 3.

Duty #	Knowledge – Skills
1	Must have an understanding of how our retirement program works. Ability to create and edit files in text format.
2	Principles and procedures of payroll preparation.
3	Understanding of garnishment rules and regulations. Must be able to act in a discreet manner to avoid violating an employees privacy.
4	Must understand the rules and regulations regarding what is covered under the flexible spending plans. Must be able to make an educated decision on questionable issues or be able to research coverage through various channels.
5 & 7	Be able to create and maintain Excel spreadsheets. Must have an understanding of how the plan works so the correct amounts are reimbursed and accounts do not become over extended.
6 & 10	Extensive understanding of payroll rules and regulations for regular hourly, salary and fire personal. Compile payroll data from timesheets. Generate computer reports required to compute and verify payroll data. Review wages and deductions. Correct any errors to ensure the accuracy of payroll. Must be able to use the New World Software system.
8	Provide payroll information and answer employee questions regarding pay, deductions, leave accruals, flexible spending accounts or any other payroll related question. Assist supervisors in interpretation of time and pay regulations. Assist HR in any payroll related issues that arise.
9	Ability to create files to be sent to the bank. Ability to use the banking website.
11	Understanding of pertinent Federal, State and local codes, laws and regulations. Ability to use the Federal and State websites.
12 & 13	Must have an understanding of payroll tax laws and requirements to prepare, reconcile and submit quarterly and annual reports by maintaining necessary logs, spreadsheets and records..
14 & 16	Must have a understanding of the principles and procedures of financial record keeping and reporting. Must have a good understanding of the accounting rules and regulations. Must have strong mathematical skills.
15	Principles and practices of employee payroll wage assignments and garnishments.
17	Business letter writing and basic report preparation

### **III. EDUCATION, EXPERIENCE, AND EQUIPMENT**

**1. EDUCATION:** What level of education do you have and what minimum level of education do you believe is needed to satisfactorily perform your job at entry level? Check the level that applies to your job:

You Have	You Need	
<input type="checkbox"/>	<input type="checkbox"/>	Less than High School Diploma or equivalent (G.E.D.) (ability to read, write, and follow directions)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	High School Diploma or equivalent (G.E.D.)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Up to one year of specialized or technical training beyond high school
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Associate degree (A.S., A.A.) or two-year technical certificate
<input type="checkbox"/>	<input type="checkbox"/>	Bachelor's degree
<input type="checkbox"/>	<input type="checkbox"/>	Other (explain):

**2. EXPERIENCE:** What kinds of experience do you have, and what minimum kinds of experience are needed to enter your job at entry level?

#### **Type of Experience**

<u>You Have</u>	<u>Your Time</u>	<u>You Need</u>	<u>Minimum Time Required</u>
Worked as a payroll Tech	3 years		1 years
General clerical accounting experience	10 years		2 years
Continuing education in Payroll policies and procedures	Varies years		Varies years

a. What field (s) should training or degree be in?  
Human Resource Management, accounting or finance.

**3. SPECIAL REQUIREMENTS:** List any registrations, certifications or licenses that are **required** for you to hold your position. Be specific and do not abbreviate words or use acronyms.

**4. MACHINES, TOOLS AND EQUIPMENT.** List any machines, tools or equipment used in your work and indicate the frequency and time spent using each. The machines, tools and equipment must refer to the Essential Duties you listed in Section 3.

Duty #	Machines, Tools, Equipment	Frequency/Time
	Computer	70
	Calculator	5
	Printer	5
	Multi-line phone	20

**5. DECISION-MAKING & JUDGMENTS.**

- a. Describe three types of important decisions and judgments you make regularly and independently in the performance of your duties.
  - 1. The best way to pay an employee so they are compensated correctly for their time.
  - 2. When and how to apply deductions to an employee's check based on the rules and regulations that govern the specific deduction.
  - 3. The best way to correct any payroll errors.



## **IV: AMERICANS WITH DISABILITIES ACT REQUIREMENTS**

### **1. PHYSICAL ACTIVITIES/REQUIREMENTS.**

This section helps us understand the physical activities and requirements that are absolutely necessary for you to be able to do in order to perform your job. Please list the frequency and the importance of each of the physical requirements listed in this section. These physical activities/requirements will help in ensuring the City of Grand Junction remains in compliance with the Americans with Disabilities Act.

The City of Grand Junction is required to document any physical requirements in order to legally defend restrictions that are imposed. The definitions for the physical activities/requirements are taken directly from the guidelines established by the federal government. Your answers in this section will not affect how your job is classified.

#### **Frequency**

#### **Importance**

**How frequently is the activity performed?**

**How important is the activity in accomplishing the job's purpose?**

- 0 – Never
- 1 – Annually
- 2 – Quarterly (at least 3 per year)
- 3 – Monthly (at least 8 per year)
- 4 – Weekly (at least 3 per month)
- 5 – Daily (at least 3 per week)

- 0 – Not Important
- 1 – Somewhat Important
- 2 – Very Important
- 3 – Extremely Important

<b>Physical Activity</b>	<b>Frequency</b>	<b>Importance</b>	<b>Duties</b>
<b>Climbing:</b> 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.	0--Never	0--Not Important	
<b>Balancing:</b> 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.	0--Never	0--Not Important	
<b>Stooping:</b> 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.	0--Never	0--Not Important	
<b>Kneeling:</b> Bending legs at knee to come to a rest on knee or knees.	1--Annually	0--Not Important	
<b>Crouching:</b> Bending the body downward and forward by bending leg and spine.	3--Monthly	1--Somewhat Important	Looking though filing cabnit drawers
<b>Crawling:</b> Moving about on hands and knees or hands and feet.	0--Never	0--Not Important	
<b>Reaching:</b> Extending hand(s) and arm(s) in any direction.	3--Monthly	0--Not Important	Reaching file boxes on shelf
<b>Standing:</b> Particularly for sustained periods of	5--Daily	1--Somewhat Important	being able to

time.			walk to office equipment
<b>Walking:</b> Moving about on foot to accomplish tasks, particularly for long distances.	5--Daily	1--Somewhat Important	being able to walk to office equipment
<b>Pushing:</b> Using upper extremities to press against something with steady force in order to thrust forward, downward or outward.	3--Monthly	0--Not Important	putting file boxes back on shelves
<b>Pulling:</b> Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion.	3--Monthly	1--Somewhat Important	pulling file boxes off shelf
<b>Fingering:</b> Picking, pinching, typing or otherwise working, primarily with fingers rather than with the whole hand or arm as in handling.	5--Daily	3--Extremely Important	Typing, 10-key entry
<b>Grasping:</b> Applying pressure to an object with the fingers or palm.	3--Monthly	1--Somewhat Important	Pulling file boxes from shelf
<b>Lifting:</b> 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 be a considerable degree and requires the substantial use of the upper extremities and back muscles.	3--Monthly	1--Somewhat Important	Pulling file boxes
<b>Feeling:</b> Perceiving attributes of objects, such as size, shape, temperature or texture by touching the skin, particularly that of fingertips.	0--Never	0--Not Important	
<b>Talking:</b> 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.	5--Daily	2--Very Important	Must be able to communicate with employees and fellow employees
<b>Hearing:</b> Perceiving the nature of sounds with no less than a 4db loss @ 500 Hz, 1,000 Hz and 2,000 Hz with or without correction. Ability to receive detailed information through oral communication, and to make fine discriminations in sound, such as when making fine adjustments on machined parts.	5--Daily	2--Very Important	Must be able to hear peoples questions and concerns
<b>Seeing:</b> The ability to perceive the nature of objects by the eye. Seeing is important for hazardous jobs where defective seeing would result in injury and also jobs where special and minute accuracy, inspecting and sorting exist. A high degree of visual efficiency, placing intense and continuous demands on the eyes by moving machinery and other objects are also considered important. Other important factors of seeing are acuity (near and far), depth perception (three dimensional vision), accommodation (adjustment of lens of eye to bring an object into sharp focus), field of vision (area that can be seen up and down or to the right or left while eyes are fixed on a given point) and color vision (ability to identify	5--Daily	2--Very Important	Must be able to read paperwork

and distinguish colors).			
<b>Repetitive Motions:</b> Substantial repetitive movements (motions) of the wrists, hands, and/or fingers.	5--Daily	3--Extremely Important	Typing, holding a phone
<b>Sedentary Work:</b> 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.	5--Daily	3--Extremely Important	Sitting at a computer all day
<b>Light Work:</b> Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or a 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.	4--Weekly	1--Somewhat Important	Lifting file boxes
<b>Medium Work:</b> 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.	0--Never	0--Not Important	
<b>Heavy Work:</b> 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.	0--Never	0--Not Important	
<b>Very Heavy Work:</b> 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.	0--Never	0--Not Important	

## 2. WORKING CONDITIONS.

The working conditions section helps us to understand the physical environment you are subjected to while performing your job duties. This section does not apply to conditions like an old office building but only those factors that have to do with the job itself. In this section, please place an X by the condition that applies and one under the frequency that is most appropriate. The condition should be unique to your job and not generally applicable to all employees with the organization. **Please note, there is a choice for "Does Not Apply," if most of your work is in an office setting.**

☒ **Does Not Apply**

Condition	Less than 25% of the time	25-50% of the time	More than 50% of the time
Hazardous physical conditions (mechanical parts, electrical currents, vibration, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Atmospheric Conditions (fumes, odors, dusts, gases, poor ventilation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hazardous materials (chemicals, blood and other body fluids, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extreme temperatures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate lighting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work space restricts movement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intense noise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental (disruptive people, imminent danger, threatening environment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## V: EMPLOYEE, SUPERVISOR, AND DEPARTMENT HEAD SIGNATURES

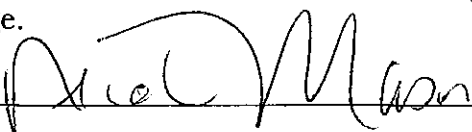
### ADDITIONAL COMMENTS

Are there any additional comments you would like to make to be sure you have described your job adequately? (Use additional sheets if necessary).

## EMPLOYEE CERTIFICATION

I certify that the above statements and responses are accurate and complete to the best of my knowledge.

Signed: \_\_\_\_\_



Date: \_\_\_\_\_

2/4/09

**TO BE COMPLETED BY THE IMMEDIATE SUPERVISOR AND DEPT. HEAD**

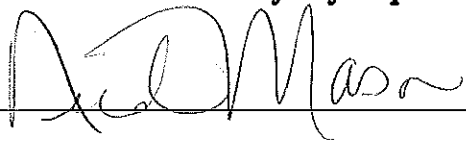
This section is to be used by the Supervisor to note any additional comments, additional duties or disagreements with any section of the questionnaire. The Supervisor should not change anything written by the individual filling out the questionnaire nor should they address any performance issues. Please remember that this questionnaire is intended solely for the purpose of accurately describing the job in question. Supervisors, please review the entire JAQ for completeness and accuracy. If there are sections that are not complete or are incorrect, please fill in the blanks when you review the questionnaire with the incumbent. If you disagree with any information provided or believe some information is missing, indicate below the question number and your comments. **Please note the form should have all three signatures to ensure all have read the questionnaire.**


Question No.	Comments

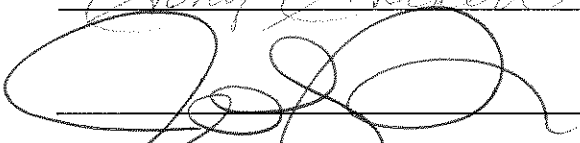
**Please check the appropriate statement:**

- ☐ I agree with the incumbents' position questionnaire as written.
- ☐ The above modifications have been discussed with the incumbent, and the incumbent agrees with these modifications.
- ☐ The above modifications have been discussed with the incumbent, and the incumbent disagrees with these modifications.

**I have noted the modifications made by my supervisor in the Comments Section above.**

Employee Signature:  Date: \_\_\_\_\_

Supervisor Signature:  Date: 2/4/09

Department Head Signature:  Date: 2/6/09

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE. AFTER YOU OR YOUR GROUP HAS COMPLETED YOUR PORTION OF THE QUESTIONNAIRE, PLEASE SUBMIT THE QUESTIONNAIRE TO YOUR SUPERVISOR FOR REVIEW, SIGNATURE, AND COMMENT. YOUR SUPERVISOR WILL SUBMIT THE COMPLETED QUESTIONNAIRE TO YOUR DEPARTMENT HEAD.