# CITY OF GRAND JUNCTION JOB ANALYSIS QUESTIONAIRE

name,	<b>PLOYEE BACKGROUND</b> : In this secticularies of the current job title, your immediate supervicularies in this section.  In this section in the study.			
	s a group questionnaire?   Yes  No	If yes, please	list all employe	ee names.
Divis	sion: Visitor and Convention Bureau	Departmen	t: VCB	
	For Individual Que	estionnaires	Only:	
Employ	Wiseman yee Name:	Mela	nie	В.
	(Last)	(First)		(Middle Initial)
hirren	Visitor Center Co	ordinator		
Divisio		Department	VCB	
otal L	Length of Time with organization	Years 7	months	
otal L	Length of Time in Current Position	Years 7	months	
		As	signed Days/W	eek M-F
Assign	ed Hours/Week:; from 8:30 t o 5:00			
Email:	melaniew@gjcity.org	Work Phone:	970-256-4057	
	Immediate Supervisor:	<u>Immed</u>	iate superviso	or reports to:
lame:	Barbara Bowman	Name:	Debbie Kovalik	
Title:	Division Manager	Title:	Executive Direct	or
Vork	970-256-4051	Work	970-256-4052	

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# 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.

Visitor Center Coordinator

To manage and coordinate the Grand Junction Visitor Center as a successful business with the ultimate goal in mind of visitor satisfaction and return, and economic stimulation. To train and support staff (80 volunteers), to operate 7 days a week, 362 days a year, professional and informational presentation of our product (Grand Junction and surrounding areas) to our customers (visitors) for their most positive experience possible, maintain current and accurate records, and team with the marketing and sales staff for synergy.

### 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
X	I do not officially supervise other employees (sign performance reviews).	
	I evaluate and sign performance reviews of other full-time employees.	
	I evaluate and sign performance reviews of part-time, temporary or contract employees.	
	I instruct other employees in methods or procedures needed to carry out their job (how to carry-out their assigned duties).	
	☐ I make work assignments for others.	
	I make hiring and hiring pay recommendations.	
	I make hiring and hiring pay decisions.	
	I recommend termination for poor performance.	
X	I provide advice to peers that they must consider carefully before making a decision.	
X	I provide information to supervisors/management that they use in making a decision.	

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

Sales Assistant
Visitor Services Coordinator
Division Manager
Administrative Specialist (2)
Marketing and PR Coordinator
Marketing and PR Assistant
Administrative Clerk
Events Assistant

### YOUR DIRECT REPORTS' JOB TITLES

80 Volun	teers		
1 Intern			 

Please indicate the nature of the group s	supervised and the number s	supervised
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□Full Time

☑Part-Time 1

□Seasonal/Temp

**⊠**Volunteer 80

 $\Box$ 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		
Stores	1-2 TIMES / MONTH	ORDER SUPPLIES/INVENTORY
Purchasing	WEEKLY	SPECIAL VCB REMODEL PROJECT

# 2. Outside your organization:

Title of Person or Organization	How Often	For What Purpose
Ex: Vendors, Gen. Public		
VENDORS	MONTHLY	PURCHASES FOR GIFT SHOP
COMMUNITY BUSINESSES	Weekly	COORDINATE MONTHLY VOLUNTEER INFORMATIONAL FIELD TRIPS AND TO GET BROCHURES ABOUT THEIR BUSINESSES TO DISTRIBUTE IN THE VCB
TOURISM BUSINESSES	WEEKLY	THEY NEED GRAND JUNCTION MAPS AND BROCHURES TO DISTRIBUTE TO VISITORS
TOURISM BUREAUS	WEEKLY	REORDER BROCHURES AND MAPS FROM BLM, DIV. OF WILDLIFE, OTHER CITIES AROUND COLORADO, ETC.
VOLUNTEERS	SEVERAL TIMES DAILY	SCHEDULE CHANGES, HEALTH ISSUES, COMMUNICATION AND SHARING OF UPDATED INFORMATION
DESIGNER/CONSULTA NT	WEEKLY	CURRENT VCB REMODEL PROJECT

#### 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
			7.11.6
EXAMPLES:			
Prepares monthly newsletters by gathering information, writing copy, editing, preparing for publication and overseeing distribution.	Articles to include, editorial changes, graphics, layouts	М	25%
Performs inventory spot checks and monthly counts of supplies in warehouse.	When to check supplies	M	10%

	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	Prepare and distribute monthly newsletter, gather information, write copy, edit, take pictures	Layout, graphics, volunteer recognition, informational articles, editing (weekly)	Monthly	5
2	Prepare monthly volunteer schedule, make updates as volunteer schedules change, coverage for 3 shifts of 2 people each shift, 362 days per year	Decide who to contact to volunteer when regulars can't work, decide what teams would work well together, when to react to scheduling problems and how	Daily	5

1		
	5	Gift Shop- purchasing, cash register
		reconciliation, inventory management, sales and
		tax reporting, budgeting
1		

Visitor Center Maintenance - update displays, keep event postings current, reorder Visitor Center brochures, keep track of brochure inventory, cleanliness and neatness of facility,

6

reconciliation (weekij)
What brochures and event
posters to offer, how to
create the best displays to
show off events and area
activities, creating a
meaningful atmosphere

for visitors, when building maintenance is required

order, pricing, problem solving cash register reconciliation (weekly)

Daily	5

7	Keeping Visitor Center Records- Visitor stats,
	volunteer stats, gift shop stats, data collection and
	input

What format for
spreadsheets and
what information to
collect, how to collect
information most
efficiently and how
best to use this
information (some

weekly, some monthly)

Monthly	5

lighting and safety.

8	Visitor Center major remodel to modernize the center, make it more visitor interactive, and to offer interpretive displays	What changes need to be included in the remodel, select designer and work through project coordination process with purchasing, decisions to be kept within budget	Monthly	5
9	Work closely with marketing and sales team so there is department synergy, staff meetings, group projects and staff support	How can I best assist others on the team so we are all on the same page, to help spread out work loads and help team building.	Daily	5
10	Daily clerical funtions - copying, faxing, letters and cards, telephone, e-mails	Setting priorities, deciding best way to communicate depending on situation, using good communication skills	Daily	5
11			Select	
12			Select	
13			Select	
14			Select	
15			Select	
16			Select	
17			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	Keyboard, Publisher, above average writing skills, insightfullness and creative
2	Word, e-mail and phone skills, prioritizing, flexibility, organized

`3	Business common sense, Word, good communication skills, organized, professional, insightful, enthusiastic
4	Patience, mentoring, ability to train for retention, ability to understand and work with seniors, creativity in coming up with new or best ways to recognize volunteers
5	Budgeting skills, business math, purchasing and negotiating skills
6	Multi task skills, prioritizing, professional telephone skills
7	Excell, business math
8	Purchasing and negotiating skills, business e-mail, phone and written skills
9	Prioritizing, multi-task, teamwork and flexibility
10	Computer and printer, copy and fax machines, calculator
<b>VALUE OF THE PROPERTY OF THE </b>	

# 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	
		Less than High School Diploma or equivalent (G.E.D.) (ability to read, write, and follow directions)
	$\boxtimes$	High School Diploma or equivalent (G.E.D.)
		Up to one year of specialized or technical training beyond high school
		Associate degree (A.S., A.A.) or two-year technical certificate
$\boxtimes$		Bachelor's degree
		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

You Have	Your Time		You Need	<u>Ti</u>	imum <u>me</u> uired
Purchasing, PR, advertising, marketing, volunteer and retail/distribution business management	28 years combined	years	marketing, volunteer and business management	2	years
		years			years
		years			years

a. What field (s) should training or degree be in? marketing and business administration, volunteer management

**<sup>3.</sup> 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
1-10	computer and printer	daily - very often
5,7,8,10	calculator	weekly- frequent
1-10	copier	daily - very often
7	fax machine	weekly - infrequent
1-10	telephone	daily - very often
11111		
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#### 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. Volunteer Training and mentoring- when to delegate, what and when training is required and how to best accomplish it for each individual person as we all learn differently. What volunteer behavior is appropriate or not, when is intervention necessary. When and how to recognize volunteers for their weekly volunteering or special accomplishments. All of the decisions that go into creating monthly training seminars or outings and the large annual volutneer banquet. When to listen and take feedback of volunteers seriously, and when are they just being negative. When do they need support and mentoring.
- 2. Budgeting making gift shop purchases within budget, as well as remodeling and volunteer related expenditures also within budget. Creating new budget figures each year for the next year based on history and new needs.

# 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 How frequently is the activity performed?

# **Importance**

# 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

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.  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.  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.  Kneeling: Bending legs at knee to come to a rest on knee or knees.  Crouching: Bending the body downward and forward by bending leg and spine.  Crouching: Moving about on hands and knees or hands and feet.  Reaching: Extending hand(s) and arm(s) in any direction.  Standing: Particularly for sustained periods of time.  Walking: Moving about on foot to accomplish tasks, particularly for long distances.  Pushing: Using upper extremities to press against something with steady force in order to thrust	Physical Activity	Frequency	Importance	Duties
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time.  Walking: Moving about on foot to accomplish tasks, particularly for long distances.  Pushing: Using upper extremities to press against something with steady force in order to thrust  The state of the state		,	1	
time.  Walking: Moving about on foot to accomplish tasks, particularly for long distances.  Pushing: Using upper extremities to press against something with steady force in order to thrust  The state of the state	Standing: Particularly for sustained periods of	5Daily	3Extremely Important	
tasks, particularly for long distances.  Pushing: Using upper extremities to press against something with steady force in order to thrust	time.	,	, ,	
tasks, particularly for long distances.  Pushing: Using upper extremities to press against something with steady force in order to thrust	Walking: Moving about on foot to accomplish	5Daily	3Extremely Important	
something with steady force in order to thrust	tasks, particularly for long distances.	J		
something with steady force in order to thrust	<b>Pushing</b> : Using upper extremities to press against	0Never	0Not Important	
	something with steady force in order to thrust		<b>^</b>	ange en
forward, downward or outward.	forward, downward or outward.			

<b>Pulling:</b> Using upper extremities to exert force in order to draw, drag, haul or tug objects in a	4Weekly	2Very Important	
sustained motion.  Fingering: Picking, pinching, typing or otherwise working, primarily with fingers rather than with the	5Daily	3Extremely Important	
whole hand or arm as in handling. <b>Grasping:</b> Applying pressure to an object with the	5Daily	3Extremely Important	
fingers or palm.			
<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.	5Daily	3Extremely Important	
<b>Feeling</b> : Perceiving attributes of objects, such as size, shape, temperature or texture by touching the skin, particularly that of fingertips.	5Daily	1Somewhat Important	
<b>Talking</b> : Expressing or exchanging ideas by means of the spoken work. Those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.	5Daily	3Extremely Important	
<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.	5Daily	2Very Important	
Seeing: 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 and distinguish colors).	5Daily	2Very Important	
<b>Repetitive Motions</b> : Substantial repetitive movements (motions) of the wrists, hands, and/or fingers.	5Daily	3Extremely Important	
<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.	5Daily	2Very Important	
<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.	5Daily	3Extremely Important	

Medium Work: Exerting up to 50 pounds of force	3Monthly	1Somewhat	
occasionally, and/or up to 20 pounds of force	_	Important	
frequently, and/or up to 10 pounds of force		<b>T</b>	
constantly to move objects.			
Heavy Work: Exerting up to 100 pounds of force	0Never	0Not Important	
occasionally, and/or up to 50 pounds of force		•	
frequently, and/or up to 20 pounds of force	•		
constantly to move objects.			
Very Heavy Work: Exerting in excess of 100	0Never	0Not Important	
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.			

#### 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.)			
Atmospheric Conditions (fumes, odors, dusts, gases, poor ventilation)			
Hazardous materials (chemicals, blood and other body fluids, etc.)			
Extreme temperatures			
Inadequate lighting			
Work space restricts movement			
Intense noise			
Travel			
Environmental (disruptive people, imminent danger, threatening environment)			

# 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).

This position requires many, many skills which are not measurable. Skills such as judgment, compassion, listening skills, patience, flexibility, maturity, professionalism, teamwork, ability to multi task and work with constant interruptions and so much more.

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

Signed

Melanie Weseman

Date:

10/29/08

# 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. The Supervisor does not need to read the entire JAQ. Simply check the areas identified with arrows for accuracy as these are the most important in classifying the jobs. If these sections 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.

<b>Question No.</b>	
	Comments
1000.000	
	·

# 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:

Department Head Signature:

Date:

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.