

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: Planning

Department: Public Works & Planning

For Individual Questionnaires Only:

Employee Name:	Cox	Lisa	E.
	(Last)	(First)	(Middle Initial)

Current Classification Title: Planning Manager

Division	Planning	Department	Public Works & Planning
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Total Length of Time with organization 9 Years 6 months

Total Length of Time in Current Position 1 Years 10 months

Assigned Hours/Week:: from 8 am to 5 pm **Assigned Days/Week** 5 days, M-F

Email: lisac@gjcity.org

Work Phone: (970) 244-1448

Immediate Supervisor:

Immediate supervisor reports to:

Name:	Tim Moore	Name:	Laurie Kadrich
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Title:	Director, Public Works & Planning	Title:	City Manager
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Work Phone	(970) 244-1557	Work Phone:	(970) 256-4154
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E-mail:	timm@gjcity.org	E-mail:	lauriek@gjcity.org
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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.

To plan, direct and manage the operations of the Planning Division of the Public Works and Planning Department. Oversee the development review process (current planning projects and permits), the long range planning activities (Comprehensive Plan and periodic updates of neighborhood and special area plans) and to update City regulatory codes and development standards (Zoning Code and submittal standards manual). Coordinate and support activities with other City departments and the Grand Junction development community. Provide highly responsible, technical and complex administrative staff support to the Planning Commission, City Council and the Director of Public Works and Planning.

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 type="checkbox"/>	I do not officially supervise other employees (sign performance reviews).	
<input checked="" type="checkbox"/>	I evaluate and sign performance reviews of other full-time employees.	3
<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).	19
<input checked="" type="checkbox"/>	I make work assignments for others.	6
<input checked="" type="checkbox"/>	I make hiring and hiring pay recommendations.	20
<input checked="" type="checkbox"/>	I make hiring and hiring pay decisions.	20
<input checked="" type="checkbox"/>	I recommend termination for poor performance.	20
<input checked="" type="checkbox"/>	I provide advice to peers that they must consider carefully before making a decision.	6-7
<input checked="" type="checkbox"/>	I provide information to supervisors/management that they use in making a decision.	3

- 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

Neighborhood Services Manager
Engineering Manager
Riverside Parkway Manager
Public Works & Planning Public Info. Officer
Administrative Specialist

YOUR DIRECT REPORTS' JOB TITLES

Development Services Supervisor - 1
Planning Services Supervisor - 1
Administrative Specialist - 1

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

☒ Full Time 19 ☐ Part-Time ☒ Seasonal/Temp 1 ☐ 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		
Legal Division	Weekly	Coordination of planning issues/Code interpretations/Legal advice
Finance Division	Monthly	Budgetary issues
VCB	Monthly	Coordination of new projects/developments in GJ
Development Engineers	Monthly	Development related exemption requests
City Clerk	Weekly	Coordination of Council agenda items, video streaming for Planning Commission meetings

2. Outside your organization:

Title of Person or Organization	How Often	For What Purpose
Ex: Vendors, Gen. Public		
Chamber of Commerce	Monthly	Meet with Planning Oversight Committee to discuss current planning issues and community feedback from customer survey/interviews
Land use Consultants	Weekly	Comprehensive Plan process, Zoning Code update, special fiscal studies and neighborhood or area plans
Development Community: Engineers, Attorneys, Planners, Surveyors, etc.	Weekly	Questions or problems concerning zoning or development in GJ. Often offer suggestions for updates to Zoning Code/City development stds
Citizens	Weekly	Questions or problems concerning zoning, new development or permits/planning clearances
Mesa County Government and Planning Department	Weekly	Coordination on Comprehensive Plan process, current planning projects and joint hearing items for City and County Planning Commissions
Downtown Development Authority	Monthly	Development issues, questions regarding Zoning Code requirements and interpretations

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
EXAMPLES:			
Prepares monthly newsletters by gathering information, writing copy, editing, preparing for publication and overseeing distribution.	Articles to include, editorial changes, graphics, layouts	M	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	Management of overall operations of Planning Division staff and activities (current and long range planning) in support of City goals; manage the Division's workplan w/coordination through subordinate staff; review/evaluate work procedures	Determine appropriate allocation of fiscal and human resources; determine appropriate workplan w/input from staff; evaluate monthly progress	Monthly	10%
2	Manage special projects such as Comprehensive Plan process, updating of Zoning Code and replacement of planning software for Planning Division	Determine need for project or product, prepare RFP and provide project management through completion	Weekly	20%
3	Write and review text amendments, proposed ordinances, policies and development standards related to zoning, development and long range planning	Determine appropriate text amendments or development standards that are needed; determine appropriate City policies that require Code amendments	Monthly	20%

4	Select, train, motivate and evaluate personnel; provide or coordinate internal and external education/training for staff; provide employee coaching/mentoring	Make personnel and staffing decisions; assess training needs/interests of staff, provide opportunities for growth and development	Monthly	5%
5	Preparation of Planning Division annual budget; administration of Division budget; make projections for needed staff, equipment, supplies; approve expenditures	Budgetary oversight occurs throughout the year; expenditures approved weekly	Monthly	10%
6	Meet with development community and citizens regarding development issues; provide assistance with development issues or questions; meet with community associations and advise on development policies, codes and standards; respond to and resolve difficult and sensitive citizen inquiries and complaints	Maintain contact with development community and citizens through email, phone calls and meetings on development issues and problem resolution; determine facts of citizen inquiry or complaint; determine best approach for resolution	Weekly	5%
7	Direct the preparation of agendas for Planning Commission and Zoning Board of Appeals; participate and provide staff assistance to boards, commissions and committees such as Zoning Code Focus Group and the Chamber of Commerce Planning Oversight Committee	Determine staffing and resource needs for each board, commission or committee. Provide appropriate resources.	Monthly	5%
8	Prepare complex staff reports and analyses for major projects/development issues or text amendments; make presentations to Planning Commission and City Council	Determine appropriate level of information and detail, as well as technical analysis for reports and presentations	Monthly	10%
9	Provide technical and professional planning support to the Public Works and Planning Director	Determine appropriate resources for required support	Weekly	5%
10	Provide orientation training for new Commission and Board members; plan and direct annual training and educational retreat for Planning Commission and Zoning Board of Appeals	Determine appropriate training for new Commission and Board members; coordinate annual retreat and training; suggest possible continuing education and development opportunities	Annually	5%
11	Attend and participate in professional group meetings; stay abreast of new innovations and best management practices in the planning field	Determine appropriate continuing education workshops/conferences; network with planning professionals	Quarterly	5%
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
1,2,3,5	Knowledge of principles and practices of land use planning, zoning and development, and program development/administration; principles and practices of budget preparation/administration
1,4	Knowledge of principles of supervision, training, motivation and performance evaluations with ability to select, train, supervise and evaluate staff
2,3,6	Knowledge of methods and techniques of eliciting community participation in planning issues and programs
1-4,6-11	Knowledge of and ability to interpret and apply relevant Federal, State and local laws, codes and regulations; knowledge of recent national/state developments in the planning field, current literature and new emerging trends or best management practices in the planning field
1-3,5,7-9	Knowledge of methods and techniques of effective technical report preparation and presentation; ability to prepare clear and concise administrative and financial reports; ability to prepare and administer large and complex budgets
1,3-8	Knowledge of advanced principles, practices and techniques of public program administration; ability to manage and direct a comprehensive (full service) community development program
1-3,8-11	Knowledge of urban planning, zoning and development theory, principles/practices and their application to a wide variety of municipal planning services
1-3,5,8,9	Knowledge of research methods and sources of information related to urban planning with ability to interpret research data for reports
1,4,5	Ability to develop and implement Division work plan; ability to analyze and assess programs, policies and operational needs and to make appropriate adjustments
All	Ability to establish and maintain effective working relationships with peers and coworkers, subordinate staff, the general public and the development community through strong interpersonal and communication skills
1,2,5,7,10	Ability to plan, organize and direct the work of lower level staff
1,3,6,9	Ability to identify and respond to sensitive community needs, as well as organizational issues, concerns and needs
3,7-9	Ability to provide highly complex, technical staff support to City Council, Planning

	Commission, Director of Public Works & Planning Department
All	Knowledge of computer software applications including general office programs such as Microsoft Office, planning software applications, Geographic Information Systems, and various internet applications
All	Ability to work on multiple projects, issues or tasks simultaneously

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 type="checkbox"/>	<input type="checkbox"/>	High School Diploma or equivalent (G.E.D.)
<input type="checkbox"/>	<input type="checkbox"/>	Up to one year of specialized or technical training beyond high school
<input type="checkbox"/>	<input type="checkbox"/>	Associate degree (A.S., A.A.) or two-year technical certificate
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Bachelor's degree
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Other (explain): Master of Public Administration degree or other related field

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>
Administrative/Management and Supervisory experience	14 years	Administrative/Management and Supervisory experience	2-3 years
Additional Planning training	15 years	Additional Planning training	1-2 years
Budgetary experience	11 years	Budgetary experience	1-2 years

a. What field (s) should training or degree be in?

Planning, Geography, Landscape Architecture, Political Science, or related field from an accredited

college or university.

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.

None are required, however, certification from the American Institute of Certified Planners is highly desirable.

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
All	Computer	Daily
1,2,4-6,10	Telephone and Fax machine	Daily
1-3,5,7-10	Copier	Daily
1-3,5,7-10	Printer	Daily
2,8	Architect and Engineer scales	Monthly
1-3,5,7,8,10	Scanner	Weekly
1,2,5	Calculator	Weekly
All	Standard office supplies	Daily
2,6,10,11	City vehicle	Weekly

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. Interpret various provisions of the Zoning and Development Code and other regulatory development standards to determine their applicability to specific sites and/or development projects.

2. Determine appropriate language, technical standard and applicability of proposed Zoning Code and related development manuals/standards text amendments.

3. Determine appropriate level of fiscal and/or human resources for assignment to specific issues or projects.

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

0 – Not Important

1 – Annually

1 – Somewhat Important

2 – Quarterly (at least 3 per year)

2 – Very Important

3 – Monthly (at least 8 per year)

3 – Extremely Important

4 – Weekly (at least 3 per month)

5 – Daily (at least 3 per week)

Physical Activity	Frequency	Importance	Duties
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.	5--Daily	1--Somewhat Important	
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.	Select	Select	
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.	4--Weekly	1--Somewhat Important	
Kneeling: Bending legs at knee to come to a rest on knee or knees.	2--Quarterly	1--Somewhat Important	
Crouching: Bending the body downward and forward by bending leg and spine.	4--Weekly	1--Somewhat Important	
Crawling: Moving about on hands and knees or hands and feet.	Select	Select	
Reaching: Extending hand(s) and arm(s) in any direction.	5--Daily	2--Very Important	
Standing: Particularly for sustained periods of time.	5--Daily	2--Very Important	
Walking: Moving about on foot to accomplish tasks, particularly for long distances.	5--Daily	2--Very Important	
Pushing: Using upper extremities to press against something with steady force in order to thrust	2--Quarterly	1--Somewhat Important	

forward, downward or outward.			
Pulling: Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion.	2--Quarterly	1--Somewhat Important	
Fingering: 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	
Grasping: Applying pressure to an object with the fingers or palm.	5--Daily	3--Extremely Important	
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 be a considerable degree and requires the substantial use of the upper extremities and back muscles.	5--Daily	2--Very Important	
Feeling: Perceiving attributes of objects, such as size, shape, temperature or texture by touching the skin, particularly that of fingertips.	Select	Select	
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.	5--Daily	3--Extremely Important	
Hearing: 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	3--Extremely 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).	5--Daily	3--Extremely Important	
Repetitive Motions: Substantial repetitive movements (motions) of the wrists, hands, and/or fingers.	5--Daily	2--Very Important	
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.	5--Daily	2--Very Important	
Light Work: 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	Select	Select	

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.			
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.	Select	Select	
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.	Select	Select	
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.	Select	Select	

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: Lisa E Cox

Date: 1-6-09

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.

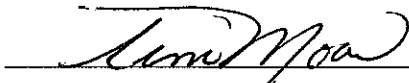
☐ The above modifications have been discussed with the incumbent, and the incumbent agrees with these modifications.

☐ 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: _____

Department Head
Signature:  Date: 1-9-09

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.