

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please list all employee names.
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Traci Wieland

Parks Superintendent - vacant

Division: Parks and Recreation

Department: Parks and Recreation

For Individual Questionnaires Only:

Employee Name:	Wieland	Traci	
	(Last)	(First)	(Middle Initial)

Current Classification Title: Recreation Superintendent/ Interim Parks Superintendent

Division	Parks and Recreation	Department	Parks and Recreation
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Total Length of Time with organization 8 Years 3 months

Total Length of Time in Current Position 3 Years 3 months

Assigned Hours/Week; from varies to usually 7am-4pm or 8am - 5pm	Assigned Days/Week varies - usually M-F
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Email: traciw@gjcity.org	Work Phone: 970-254-3846
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Immediate Supervisor:

Immediate supervisor reports to:

Name: Rob Schoeber	Name: Laurie Kadrich
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Title: Parks and Recreation Director	Title: City Manager
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Work Phone: 254-3881	Work Phone:
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E-mail: robsc@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.

Recreation/Park Superintendent

To lead, manage, and direct the daily operations of the park/recreation division including: recreation programs, facilities, operations, and maintenance.

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).	12+
<input checked="" type="checkbox"/>	I make work assignments for others.	4+
<input checked="" type="checkbox"/>	I make hiring and hiring pay recommendations.	12+
<input checked="" type="checkbox"/>	I make hiring and hiring pay decisions.	12+
<input checked="" type="checkbox"/>	I recommend termination for poor performance.	12+
<input checked="" type="checkbox"/>	I provide advice to peers that they must consider carefully before making a decision.	12+
<input checked="" type="checkbox"/>	I provide information to supervisors/management that they use in making a decision.	5+

- 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

Marketing Coordinator
Recreation/Park/Golf Superintendent
Administrative Assistant

YOUR DIRECT REPORTS' JOB TITLES

Recreation/Parks Supervisors
Administrative Asst
Arts and Culture Coordinator

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

- ☒ Full Time 3-4
 ☐ 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/Subordinates	daily/weekly	provide guidance and direction in daily work duties, provide clarification and direction on facility use guidelines and fees and charges, provide information and updates
Purchasing/Public Works/Facilities	weekly/monthly	management of capital improvement projects and other projects directly related to department, development of bid specs, development of project plans and budgets
Recreation Supervisors/Park Supervisors/Admin. Asst	daily	provide general managerial support and leadership, provide guidance and direction in daily work.
Visitor and Convention Bureau/Two Rivers Convention Center/Downtown Development Authority	weekly/monthly	banners; downtown Christmas lighting, downtown maintenance issues; and downtown projects
Committees (AIM, Health and Safety, PIO, etc.)	weekly/monthly	serve as division/department representative, gather information to disseminate to other employees
Information Systems/Finance/Administration/ Attorney/Human Resources/Risk Management	weekly/monthly	management of GBA (work order computer system) and CLASS (facility/program software system); contact in regard to CIP, budget, financial operations, payroll, payables, public information, legal advice, safety programs, worker's compensation; hiring and recruitment, disciplinary/employee issues, personnel policies

2. Outside your organization:

Title of Person or Organization	How Often	For What Purpose
Ex: Vendors, Gen. Public		
Recreation program/facility and park use/general customers	daily	provide clarification and rulings on facility use guidelines and fees and charges, provide general departmental information, serve as contact for customer service issues
Vendors/Contractors	daily/weekly	request bids, clarify contract, direct work on project, inspect work, order product, manage quotes and bid prices
Mesa County/School District 51/Mesa State College	weekly/monthly	facilitate development, implementation, and evaluation of intergovernmental agreements, develop and implement partnerships for projects and programs, facilitate facility use agreements, contracts, payments, and use guidelines
Commissions (Arts and Culture, Riverfront, Tamarisk Removal,	weekly/monthly	serve as city/department representative and liaison, gather information to be passed on to city and report on information for commissions,

Horizon Drive, Parks and Recreation, Grand Valley Recreation Center, Forestry, Urban Trails, Downtown Development Authority, City Youth Council)		develop relationships, develop and facilitate projects, programs and agreements
Non Profits (National Recreation and Park Association, Colorado Parks and Recreation Association, Colorado Tree Care Coalition, Build a Generation, Colorado Disability Cross Coalition, etc.)	monthly	partner on projects, programs, or conferences, serve as city/department representative, gather and report on information, partner on programs and events

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:			
<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>

Performs inventory spot checks and monthly counts of supplies in warehouse.	When to check supplies	M	10%
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	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	prepares budget/CIP; manages overall budget process for individual division; provides ongoing budget tracking and oversight; prepares budget reports including new position requests and fees and charges; makes recommendations and gives direction on appropriate use of funds	decides what should be included or excluded from division budget; decides how cost recovery could or should be met; determines priority of projects and purchases; decides appropriate use of funds	Weekly	10
2	provides leadership, performance management, disciplinary action, feedback, and work plans for division employees; provides general management and leadership for division employees; provides support and assistance with various programs, events, or duties requiring field/program work and provide technical expertise and support to all employees in recreational programming, aquatics facility operations, cemetery operations, horticulture operations, sports facilities, and general divisional operations; leads division in developing plans for any reorganization plans; oversees and leads the recruitment process for full time employees	decides what discipline, guidance, feedback, and direction to provide; recommend training needed or required; decide what should be part of work plans; should Human Resources/Legal be involved; determines recruitment process; makes pay and hiring decisions	Daily	25
3	prepares or oversees the preparation of various business documents and reports (facility use guidelines, activity guide, fees and charges, etc.); prepares several grant applications (Great Outdoors Colorado, Department of Local Affairs, etc.); prepares several award applications for professional associations; prepares various business correspondence such as letters, memos, press releases, etc.	decides basic grammar and format using business writing guidelines and techniques; determines content; decides timing of documents	Weekly	10
4	oversees capital improvement projects and other major projects; works with other staff, purchasing, public works, facilities, and contractors; develops bid specs, budget, and preliminary plans; inspects progress; serves on project team; leads all major purchases including fleet and other equipment	decides priority for projects, determines who should be involved, determines project specs and plans, decides budget implications and/or changes, determines if contractor is working appropriately	Monthly	15

5	determines marketing and promotional methods and plans for the division; oversees the development of promotional materials; manages related budget	decides marketing and promotional methods most appropriate and effective for division, approves overall style, format, and content, determines media outlets and methods most appropriate	Weekly	10
6	oversees all training and development and certifications for division employees based on need, relative application, and desire of employee; manages the related budget; oversees and develops safety related materials, programs, and policies for division	decides which staff needs or would benefit from what type of training; determines what certifications are relevant for positions; determines how the budget should be allocated; what safety training is needed; how to implement safety policies	Monthly	5
7	provides extensive public contact and customer service for all divisions and park users; assists employees and citizens to meet user and employee needs or requests; fields complaints, answers questions, provides support, troubleshoots, and allocates resources; takes the lead in meeting needs and concerns.	determines appropriate course of action to meet the customer's needs and desires; participates in community meetings	Daily	10
8	provides oversight for all parks and recreation facility use (Barn, stadium, multipurpose fields, softball fields, etc.); develops and provides ongoing maintenance of facility use guidelines; works with both recreation and park supervisors to facilitate maintenance and programming; works with user groups to schedule, organize and plan facility use; provides assistance to customer service representatives helping them interpret facility use guidelines and fees and charges or making decisions on how to apply those fees and charges	decides what use is appropriate for what venue; decides appropriate fees and charges for various uses; decides how to implement facility use guidelines	Weekly	10
9	develops, strengthens, and pursues community partnerships (i.e. School District 51, Mesa County, Grand Junction Tennis Club, Gray Gourmet, Senior Recreation Center, etc.); serves as department liaison for joint facility projects; assists in developing Intergovernmental Agreements with involvement from partner, internal staff, and legal	decides what partnerships are beneficial for community; decides how to proceed and who to involve in project; determines funding sources for project; determines what should be included in agreements	Monthly	5
10			Select	
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, 2, 3, 4, 5, 8, 9	general business writing skills
1, 2, 3, 4, 5, 7, 8, 9	parks and recreation marketing, programming, facility management, and operations knowledge
1, 2, 4, 8, 9	public speaking skills
1, 4, 6, 8	general knowledge of municipal budgeting principles and accounting procedures
2, 6	management and leadership skills and knowledge including staff recruitment, development and retention
2, 4, 6, 8	knowledge of city policies including disciplinary procedures, worker's compensation, compensation, purchasing, fees and charges, etc.
1, 2, 3, 4, 5, 8, 9	knowledge of public administration/municipal operations (the role of administration vs. politics, the policy process, developing relationships with partners, etc.)
7, 8	knowledge of basic computerized registration systems (CLASS) or GBA (parks work order system)
5, 7	knowledge of internet/intranet /dreamweaver
1, 2, 3, 4, 5, 6, 7, 8, 9	skill to operate and utilize basic computer programs like word, excel, new world, GIS, CLASS
1, 2, 3, 4, 5, 6, 7, 8, 9	knowledge of generally accepted or national/state standards and best practices for parks and recreation operations, facility management, and recreation programming
2, 3, 4, 6, 8	knowledge of basic safety standards for municipal operations and specific program/facility/equipment

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 type="checkbox"/>	Other (explain): 1/2 way through Master in Public Administration

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>
		years		years
Recreation Programming/Parks Operations/Facility Management	10		Recreation Programming/Parks Operations/Facility Management	7
Supervisory/Management	8	years	Supervisory/Management	5 years
Budget Development	8	years	Budget Development	5 years

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

Business Administration, Parks and Recreation Management, Leisure and Tourism Management, or Sports Management

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.

Certified Park and Recreation Professional certification.

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, 2, 3, 4, 5, 6, 7, 8, 9	computer, phone, fax	daily
1, 2, 3, 4, 5, 6, 7, 8, 9	LCD projector	monthly

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. Superintendents have 3 - 4 direct reports but routinely manage, lead, and provide guidance for their entire respective divisions. This includes making decisions on: disciplinary action, work plans, and training/education.
 - 2. Superintendents routinely make decisions and judgements for implementation of fees and charges policy as well as judgements on facility use guidelines. Rarely do all requests for facility use neatly fall into one fee or one guideline. Superintendents are required to make decisions that best meet the needs of the customers, the facility, the community, and the department.
 - 3. Superintendents determine appropriate and efficient use of funds with regard to operating budgets, personnel, and Capital Improvement Plans. Decisions are based on funds available, trends in programming, facilities, and operations, and community needs. Decisions are also required for potential partnership programs and the applicability of intergovernmental agreements.

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?

- 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)

Importance

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

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

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.	0--Never	0--Not 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.	0--Never	0--Not Important	
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.	2--Quarterly	1--Somewhat Important	4
Kneeling: Bending legs at knee to come to a rest on knee or knees.	2--Quarterly	1--Somewhat Important	4
Crouching: Bending the body downward and forward by bending leg and spine.	0--Never	0--Not Important	
Crawling: Moving about on hands and knees or hands and feet.	0--Never	0--Not Important	
Reaching: Extending hand(s) and arm(s) in any direction.	3--Monthly	1--Somewhat Important	1, 2, 3, 4, 5, 6, 7, 8
Standing: Particularly for sustained periods of time.	4--Weekly	1--Somewhat Important	2, 4, 8
Walking: Moving about on foot to accomplish tasks, particularly for long distances.	3--Monthly	1--Somewhat Important	2, 4
Pushing: Using upper extremities to press against something with steady force in order to thrust	0--Never	0--Not 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.	0--Never	Select	
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	1, 2, 3, 4, 5, 6, 7, 8
Grasping: Applying pressure to an object with the fingers or palm.	2--Quarterly	1--Somewhat Important	4
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.	0--Never	Select	
Feeling: Perceiving attributes of objects, such as size, shape, temperature or texture by touching the skin, particularly that of fingertips.	3--Monthly	1--Somewhat Important	2, 4, 5
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	1, 2, 3, 4, 5, 6, 7, 8
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	1, 2, 3, 4, 5, 6, 7, 8
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	1, 2, 3, 4, 5, 6, 7, 8
Repetitive Motions: Substantial repetitive movements (motions) of the wrists, hands, and/or fingers.	5--Daily	1--Somewhat Important	1, 2, 3, 4, 5, 6, 7, 8
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	1, 2, 3, 4, 5, 6, 7, 8
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	3--Monthly	1--Somewhat Important	2

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.	1--Annually	1--Somewhat Important	2
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.	0--Never	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.	0--Never	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: _____

Date: _____

1-7-09

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. 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.**

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: _____

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.

