

Job Analysis Questionnaire

Please fill out the following questionnaire to the best of your ability. This should take approximately an hour to complete. If you cannot complete the survey at this time, you may return where you left off by clicking the link in your email.

Please verify your information

Employee Name:

Employee ID:

Position Number:

Current Job Title:

Job Code:

Department:

Reports to:

Date:

The information above is from HRIS, is this information accurate?

Yes

No

Please enter the correct information below:

Employee Name _____

Position Number _____

Current Job Title _____

Job Code _____

Department _____

Reports to _____

Position Status

Full-time

Part-time

General Instructions: The job information requested in this questionnaire should be filled out by you, and, upon completion, the information will automatically be submitted to your supervisor. Your supervisor will not be able to change anything you write, but they will be able to add comments. Please focus your responses on those duties that are considered to be a normal expectation of your position.

I-Job Purpose

The job purpose is a brief narrative picture of the job that explains why it exists. In **one sentence**, explain what you do and why the job must be performed.

II-Essential Job Functions

Essential functions are accomplishments that must be achieved to call the job complete.

Please list the functions performed by your job and prioritize the importance of each responsibility. Although there is room for 6 functions, many jobs will have fewer.

The 5-point scale measuring the importance of each responsibility begins with 'essential' and ends with 'marginal'. Essential functions are those that are fundamental to the job. Marginal responsibilities are those that are performed infrequently or that could be performed by others.

| | | |
|------------|---------|---|
| Function 5 | EXAMPLE | <div style="border: 1px solid gray; padding: 5px; margin-bottom: 5px;"> <input type="text" value="Essential"/> </div> <div style="border: 1px solid gray; padding: 5px;"> <p>Payroll administration for the maintenance department. Collect payroll information from department employees on a bi-weekly basis. Review the collected information to make sure that it is complete and forward all appropriate documentation (time sheets, leave requests, etc.) to the business office for processing.</p> </div> |
|------------|---------|---|

Functions

| | Priority (Select One) | | | | | Description of the Function Please describe in a few sentences |
|------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|
| | Essential | Very important | Important | Somewhat important | Marginal | |
| Function 1 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Function 2 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Function 3 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Function 4 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Function 5 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Function 6 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |

Please select the function that represents the primary duty of the job. The primary duty may or may not require the most time, but represents the key reason that the job exists.

- Function 1
- Function 2
- Function 3
- Function 4
- Function 5
- Function 6

What percentage of time do you spend on each function listed above? To help you determine percentages, think of the entire year as just one day. Of that day, what percent of time do you spend on various duties?

- _____ Function 1
- _____ Function 2
- _____ Function 3
- _____ Function 4
- _____ Function 5
- _____ Function 6

III-Qualifications

Qualification requirements include education, experience, licensing and training required for the job. Do not comment on your own experience, education or licensing, rather indicate the minimum level required to perform the essential job functions.

What is the typical level of *formal* education **required** for your position?

- Less than high school
- High school or equivalent
- Two year college or technical degree
- Four-year college degree or higher

Please specify the field of study or degree related to the level of formal education selected above:

What number of years of experience *related* to the current job do you believe is necessary for an employee entering the position?

- 1 year or less
- More than 1 year up to 3 years
- More than 3 years up to 5 years
- More than 5 years up to 10 years
- More than 10 years

Are there any special certification, licenses and/or accreditation that are **required** for your position?

- No licenses, certification or accreditation required for this position
- Licenses, certification or accreditation required. Please provide detail:

Does your position require any additional training or specific experience to perform the essential functions? If yes, please describe.

IV-Knowledge, Skills & Abilities

Identify any specific knowledge, skills and/or abilities **required** to perform the **essential functions** of this job that have not been documented already in this questionnaire.

| | Knowledge, Skill or Ability: | Please describe how this knowledge, skill or ability is applied on the job: |
|---|--|--|
| 1 | Example: Ability to operate office machines (i.e., photocopier, fax machine, telephone). | Operate photocopier, fax and telephone to direct incoming calls and perform basic secretarial duties for the department. |
| 2 | | |
| 3 | | |
| 4 | | |

V-Reporting Relationships

Please select the statement that best describes your *supervisory responsibility*. Supervisory responsibility is defined as duties associated with personnel actions.

- I do not supervise anyone
- I am a lead worker. I give input to my supervisor regarding other employees' performance, but I do not make hiring and firing recommendations.
- I have primary responsibility for conducting performance evaluations and making recommendations for hiring and firing employees.

Please indicate the number of individuals you directly supervise:

Please indicate the number of individuals who report to a supervisor reporting to you:

Do you manage a department or division?

- Yes
- No

Do you have the authority to hire and fire employees?

- Yes
- No

If you do not have the absolute authority to hire and fire, are your recommendations sought and given serious consideration?

- Yes
- No

VI-Problem Solving

Kinds of problems I see

- The problems in my job usually come up again and again.
- The problems in my job are somewhat varied, but often routine.
- The problems in my job are varied.
- The problems that come to me are usually the ones that other employees have not been able to handle.

How I solve problems

- I have to check with my supervisor before I do anything other than what the established procedure states.
- I check with my supervisor if none of the usual alternatives fit the situation.
- I get help from my supervisor or others in handling unusual problems.
- I need to come up with the solution.

Please list examples of problems that you frequently solve as part of your job. Then tell us what you use to fix the problem.

| Problems | | What do you rely on to solve the problem? | | | | |
|----------|--|---|--------------------------|--------------------------|--------------------------|--------------------------|
| | | Policies | Manuals | Procedures | Rules | Independent Judgement |
| 1 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you'd like to describe the policies and procedures you use to solve problems, please do so below.

Please select the statement that best describes the information you need to rely on to solve problems.

- Specific information is immediately available and usable, such as a manual or established policies and procedures.
- Specific information is normally available and in a readily usable form.
- General information is normally available. Specific information usually has to be sought elsewhere.
- Information may be incomplete or in a form not readily usable. Specific information almost always needs to be sought elsewhere to fill in gaps.
- Information is often vague or misleading. Specific information, if available, almost always needs to be sought elsewhere.

VII-Decision Making

When you make a decision in your job, who does it affect? Complete the following sentence by checking the appropriate box(es).

When I make a decision, it primarily affects:

- My work.
- The work of others in my work group.
- The work of others in my department.
- Others in work areas outside my department.
- The public.

Please describe decisions that you are responsible for making and that you are held accountable for the result.

- 1
- 2
- 3

VIII-Consequences of Error

Please provide examples of typical errors that could be made in your job. (Please consider these errors when responding to the following two questions.)

- 1
- 2

Who would catch the errors and how long would it take to detect? (Please respond in consideration of the errors described in the question above.)

- 1
- 2

What is the approximate cost of money, time and/or effort it would take to correct the errors? Please also include the harm or hardship that the errors may cause other individuals. (Please respond in consideration of the errors described in the question above.)

- 1
- 2

IX-Work Environment

How much on-the-job time is spent in the following **PHYSICAL ACTIVITIES**? Show the amount of time by checking all applicable responses below.

| | Time spent on activity | | | | | Specific Examples |
|--|------------------------|-----------------------|------------------------|-----------------------|-----------------------|-------------------|
| | Never (0%) | Rarely (up to 15%) | Occasionally (16%-40%) | Frequently (41%-70%) | Regularly (over 70%) | |
| Sitting | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Talking | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Hearing | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Feeling attributes of objects | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Grasping | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Pushing | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Standing | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Walking | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Driving | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Reaching with hands/arms | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Stooping, kneeling, crouching, crawling | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Climbing or balancing | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Repetitive wrist, hand and/or finger movement | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Operate mechanical equipment | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Moving up and down from/to sitting position on the floor | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |

Identify which **VISUAL ACTIVITIES** are usually required during a typical workday in order to accomplish the **essential functions** of this position. Indicate all applicable responses.

- Clarity of vision at 20 feet or more.
- Clarity of vision at 20 inches or less.
- Three-dimensional vision--ability to judge distance and space relationships.
- Precise hand-eye coordination.
- Ability to identify and distinguish colors.

Describe specific examples of visual activities.

Does this job require exposure to any of the following **ENVIRONMENTAL CONDITIONS**? Please select the amount of time spent in each environmental condition and indicate which job duties are affected by the condition(s).

| | Time spent on activity | | | | | Specific Examples |
|---|------------------------|-----------------------|------------------------|-----------------------|-----------------------|-------------------|
| | Never (0%) | Rarely (up to 15%) | Occasionally (16%-40%) | Frequently (41%-70%) | Regularly (over 70%) | |
| Work in confined spaces | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Wet, humid conditions (non-weather) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Varying, inclement outdoor weather conditions | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Vibration | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Work in hazardous traffic conditions | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Extreme cold (non-weather) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Extreme heat (non-weather) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Subject to oils (mechanical or food) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Required to wear a respirator | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Fumes or airborne particles | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Work near moving mechanical parts | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Work in | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |

| | | | | | | |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|
| high, dangerous places | | | | | | |
| Risk of electrical shock | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Potentially hazardous bodily fluids | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| Potentially hazardous or cancer-causing agents or chemicals | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |

How much **NOISE** is experienced daily in the work environment of this job? Check the appropriate level below.

- Very quiet.
- Quiet.
- Moderate noise (i.e., an office with computers, photocopiers and/or computer printers).
- Loud noise. Please describe: _____
- Very loud noise. Please describe: _____

Does this job require that **WEIGHT** is lifted or **FORCE** is exerted? If so, how much and how often? Check all applicable responses below.

| | Time spent on activity | | | | | Specific Examples |
|---------------|------------------------|-----------------------|------------------------|-----------------------|-----------------------|-------------------|
| | Never (0%) | Rarely (up to 15%) | Occasionally (16%-40%) | Frequently (41%-70%) | Regularly (over 70%) | |
| Up to 1 pound | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 2-5 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 6-10 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 11-15 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 16-20 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 21-25 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 26-30 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 31-35 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 36-40 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 41-45 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 46-50 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 51-75 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 76-100 pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |
| 100+ pounds | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |

Identify the level of attention that is usually required during a typical workday in order to accomplish the essential functions of this position.

- Normal attention.
- Frequent attention (typical examples include paying bills, posting journal entries, etc.)
- Concentrated attention.
- Extremely demanding attention (typical examples include high-level managerial responsibilities).

Describe specific examples of mental activities. (i.e. how do you discover, analyze, and solve problems?)

Please describe any other working conditions that have not been identified that are applicable to this position.

Before you submit this questionnaire, please carefully read the statement below and indicate you have read it by typing your full name in the box below. Once you hit submit, the questionnaire will go to Human Capital Services (HCS) and will then be submitted to your supervisor for review.

Accurate information is needed in order to fairly and equitably create job descriptions and compare these job descriptions to market data. I certify that this accurately reflects my job duties and essential functions. I understand that audits may take place, and inaccurate reporting will result in a delay of the evaluative process.