**POSITION DESCRIPTION**

North Dakota University System

**PART A - Identification, Duties/Responsibilities, and Task Inventory**

 **(#’s 1-12a must match HRMS or left blank and include a Position Request/Change form)**

|  |  |
| --- | --- |
| 1. Name of Employee:  | 1a.EmplID #: |
| 2. Position #: | 2a. Dept. ID #: | 2b. Current or Recommended Salary: |
| 3. Band #/Title: Choose an item. | 3a. Job Family #/Title: Choose an item. |
| 4. Functional Title: |
| 5. Please check all that apply |
| 5a.Type of position: | [ ] Full time [ ]  Part-time | **IF** Part-Time, FTE Percentage: \_\_\_\_\_\_% |
| 5b. Length of Position: | [ ]  9 month [ ]  10 month [ ]  11 month [ ]  12 month | [ ] Other Month \_\_\_\_\_ |
| 6. Institution: **University of North Dakota** | 7. Division: |
| 8. Department: | 9. Unit: |
| 10. Work Mailing Address: | 11. Work Phone: |
| 12. Name & Title of Supervisor: | 12a. Supervisor Posn # : |
| 13. What is the function/mission of your department? |
| 14. What is the purpose of your position? (Why does the position exist, how does the position function within the work unit?) |
| 15. Is this position essential during emergencies/closures? [ ]  Yes [ ]  No(Essential personnel may be required to work during emergencies and closures affecting UND depending on staffing levels required for that particular situation.) |

**PART A - 16. Duties/Responsibilities**

⇒ **Indicate Essential/Secondary.** The following questions should be taken into consideration in the determination:

- Is the duty/responsibility the reason the job exists?

- Is this a highly specialized task or one that requires special education, training, licensure?

**If the answer is yes, the duty is “essential”.**

- What is the percentage of time spent on the function?

**If the answer indicates a great % of time, the duty is probably “essential”.**

- What are the consequences to others or the institution of a failure to perform the function?

**If the answer indicates a high level of accountability, the duty is “essential”.**

NOTE: See Position Description Instructions and examples.

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| **Duty/Responsibility No.**  | Percent of Time | Statement of duty/responsibility (used for evaluation/review of performance): |
| For ADA compliance, see instruction. Responsibility is: [ ] Essential [ ]  Secondary(Please check one) |
| Tasks involved in fulfilling the above duties/responsibilities (include description for physical and mental/cognitive demands) |

|  |  |  |
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| **Duty/Responsibility No.**  | Percent of Time | Statement of duty/responsibility (used for evaluation/review of performance): |
| For ADA compliance, see instruction. Responsibility is: [ ] Essential [ ]  Secondary(Please check one) |
| Tasks involved in fulfilling the above duties/responsibilities (include description for physical and mental/cognitive demands) |

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| **Duty/Responsibility No.**  | Percent of Time | Statement of duty/responsibility (used for evaluation/review of performance): |
| For ADA compliance, see instruction. Responsibility is: [ ] Essential [ ]  Secondary(Please check one) |
| Tasks involved in fulfilling the above duties/responsibilities (include description for physical and mental/cognitive demands) |

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| **Duty/Responsibility No.**  | Percent of Time | Statement of duty/responsibility (used for evaluation/review of performance): |
| For ADA compliance, see instruction. Responsibility is: [ ] Essential [ ]  Secondary(Please check one) |
| Tasks involved in fulfilling the above duties/responsibilities (include description for physical and mental/cognitive demands) |

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| --- | --- | --- |
| **Duty/Responsibility No.**  | Percent of Time | Statement of duty/responsibility (used for evaluation/review of performance): |
| For ADA compliance, see instruction. Responsibility is: [ ] Essential [ ]  Secondary(Please check one) |
| Tasks involved in fulfilling the above duties/responsibilities (include description for physical and mental/cognitive demands) |

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| --- | --- | --- |
| **Duty/Responsibility No.**  | Percent of Time | Statement of duty/responsibility (used for evaluation/review of performance): |
| For ADA compliance, see instruction. Responsibility is: [ ] Essential [ ]  Secondary(Please check one) |
| Tasks involved in fulfilling the above duties/responsibilities (include description for physical and mental/cognitive demands) |

|  |  |  |
| --- | --- | --- |
| **Duty/Responsibility No.**  | Percent of Time | Statement of duty/responsibility (used for evaluation/review of performance): |
| For ADA compliance, see instruction. Responsibility is: [ ] Essential [ ]  Secondary(Please check one) |
| Tasks involved in fulfilling the above duties/responsibilities (include description for physical and mental/cognitive demands) |

|  |  |  |
| --- | --- | --- |
| **Duty/Responsibility No.**  | Percent of Time | Statement of duty/responsibility (used for evaluation/review of performance): |
| For ADA compliance, see instruction. Responsibility is: [ ] Essential [ ]  Secondary(Please check one) |
| Tasks involved in fulfilling the above duties/responsibilities (include description for physical and mental/cognitive demands) |

**PART B – Required Experience, Characteristics and Ability**

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| **1. EDUCATION/KNOWLEDGE REQUIREMENT** - Minimum education required to perform adequately in position could reasonably be attained only by completing the following (if you were to recruit today, what qualification would you require?) |
| REQUIRED EDUCATION/TRAINING (choose one)[ ]  less than high school diploma[ ]  high school diploma or GEDCOLLEGE LEVEL (choose one)[ ]  1 year [ ]  2 year [ ]  3 year [ ]  4 year[ ]  Associate’s [ ]  Bachelor’sGRADUATE LEVEL (choose one)[ ]  1 year [ ]  2 year [ ]  post-graduate | Major field of study or degree emphasis (accounting, economics, etc...) |
| Specialized subject knowledge (cost accounting, MACRO economics, etc.) |
| Minimum Qualifications: [ ]  Valid Driver’s License [ ]  Other License(s) or Certification(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Preferred Qualifications: |
| Competencies required: (i.e. ability to…, demonstrated leadership skills, strong communication skills) |
| Work safety requirements:* Follow safety rules and promote safe behavior
* Help identify unsafe working conditions and notify supervisor or Office of Safety
* Ensure the safety policies and procedures are being followed
* Report incidents and near misses to supervisor or Office of Safety within 24 hours
* Complete all required safety and other mandatory training requirements
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|  Work habit requirements:* Attendance and punctuality consistently maintained; follows correct procedures for notification
* Use work time appropriately for work activities; attend meetings promptly
* Demonstrate flexibility in scheduling and accepting work assignments
* Follow procedures for requesting leave and reporting absences; provide necessary documentation/releases
* Remain calm, professional, and collegial in all circumstances
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| **2. RESPONSIBILITY FOR DIRECT SUPERVISION OF THE FOLLOWING CLASSIFIED POSITIONS** |
| Position Number | Job Family and Title of Persons Supervised | FTE  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  | TOTAL |  |
| **3. INDIRECT SUPERVISION:** Total number of classified positions indirectly supervised: |  |
|  Total number of student employees or other non-classified employees indirectly supervised: |  |

|  |  |
| --- | --- |
| **4. HAZARDOUS WORKING CONDITIONS** | Unusual or hazardous working conditions related to performance of duties: |
|  | Precautionary measures taken to avoid those unusual or hazardous working conditions: |
|  | Frequency of occurrence of unusual or hazardous working conditions: |

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| *FOR HR OFFICE USE ONLY:***5. This position is classified as:** [ ]  **Exempt** [ ]  **Non-Exempt (eligible for overtime)** |
| *FOR HR OFFICE USE ONLY:***Executive** [ ]  Meets FLSA Salary Requirements  | **Administrative** [ ]  Meets FLSA Salary Requirements  | **Professional** [ ]  Meets FLSA Salary Requirements  |
| [ ] Primary duty is management of the enterprise or recognized department/ subdivision[ ] Does the employee have the authority to hire or fire or provide suggestions/ recommendations to hire, fire, promote or change status of other employees | [ ] Primary duty is office/non-manual work related to management policies/general business operations[ ] Work directly related to academic instruction or training | [ ] Primary duty is work requiring knowledge of advanced type in science or learning[ ] Work is original and creative in a field of artistic endeavor[ ] Work is teaching in educational institution[ ] Work requires theoretical/practical application of highly specialized knowledge in computer systems analysis, programming and software engineering and employee is employed and engaged in these activities |
| [ ] Customarily and regularly directs the work of two or more other employees | [ ] Customarily and regularly exercises discretion and independent judgment in matters of consequence | [ ] Work requires consistent exercise of discretion and judgment |

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| **6. PHYSICAL JOB REQUIREMENTS:** Indicate according to essential duties/responsibilities |
| **Employee is required to:** | **Never** | **1-33% Occasionally** | **34-66% Frequently** | **66-100% Continuously** |
| Stand |  |  |  |  |
| Walk |  |  |  |  |
| Sit |  |  |  |  |
| Use hands dexterously (use fingers to handle, feel) |  |  |  |  |
| Reach with hands and arms |  |  |  |  |
| Climb or balance |  |  |  |  |
| Pulling/Tugging/Twisting |  |  |  |  |
| Stoop/kneel/crouch or crawl |  |  |  |  |
| Talk or hear |  |  |  |  |
| Taste or smell |  |  |  |  |
| Lift & carry: up to 10 pounds |  |  |  |  |
| up to 25 pounds |  |  |  |  |
| up to 50 pounds |  |  |  |  |
| up to 75 pounds |  |  |  |  |
| up to 100 pounds |  |  |  |  |
| more than 100 pounds |  |  |  |  |
| Other (Please Explain):  |

My signature below indicates I have read and understand the description of the duties and responsibilities assigned to the position. I also understand that my supervisor and the institution has the right to make changes to duties and work schedule to meet business needs.

Employee's Signature Date

Supervisor's Signature Date

**PLEASE ATTACH A BLACK AND WHITE ORGANIZATIONAL CHART**

Last updated 04/20/2017