**NKU JOB ANALYSIS QUESTIONNAIRE**

|  |  |  |  |
| --- | --- | --- | --- |
| **Position Holder’s Name:** |  | **Posn. Title:** |  |
| **Org. Unit Name** |  | **Division:** |  |
| **Reports to (Name):** |  | **Supervisor’s Job Title:** |  |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SUMMARY:** *(Briefly describe the purpose, and contributions of this position to the dept. or the university):*

**DUTIES AND RESPONSIBILITIES:**

*(List in order of importance the core duties and responsibilities of the job, and estimate the percentage of time spent on each responsibility. The total time must equal 100%)*

|  |  |  |
| --- | --- | --- |
|  | Description of Duties | **% of time** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| 9 |  |  |
| 10 |  |  |
|  |  |  |

**QUALIFICATIONS:**

What is the ***minimum*** level of education required for this position?

High School Diploma/GED Bachelor’s Degree

Associate’s Degree Master’s Degree

Technical/vocational school PhD

Bus/Tech. School JD

Other: Please Specify:

**What type of college study (major) or technical training would be required?**

**What is the minimum amount of total related work experience required?**

l Yr 2 Yrs. 3 Yrs. 4 Yrs. 5 Yrs. 6 Yrs Other (specify # whole yrs.)

Comments:

**What is an acceptable equivalency?**

**Minimum amount of previous related management experience required, if applicable.**

l Year 2 Years 3 Years 4 Years 5 Years 6 Years Other (specify # whole yrs.)

**Are any Certifications or Licenses required?** Yes (explain)        No

**List other required skills (computer skills, etc), training and/or abilities to qualify for this position:**

**Does this position have supervisory responsibilities (i.e., responsible for hiring, managing staff, performance evaluations, etc.)?**  YES NO

If yes, list the number and title(s) for positions that directly or indirectly report to this position:

**How is this position supervised?** closely moderately minimally

Please explain:

**How frequently is work performance checked by supervisor?**

Close/Regular Checks

Employee operates from standard practices and procedures

Employee largely plans and arranges own work

**To what degree does this position determine own work priorities?**

Predetermined Half time

Quarter of Time Half to Three Quarters

Quarter to Half Time More than Three Quarters

**Describe the academic and student support interactions of this position.**

**What equipment, materials, or tools are used/handled/operated by this position?**

**Indicate physical effort demands of Job (lifting, carrying, standing etc.) and working conditions (indoor, outdoor, normal office conditions etc.) and exposure to hazards.**

Explain:      

**List any other special qualifications required for filling this position (ability to drive, valid driver license, need to have a dependable vehicle with appropriate insurance, etc).**

Immediate Supervisor Signature: Date:

Dept. Head Supervisor Signature: Date:

Division Head Signature: Date:

**Addendum to Job Description Template:**

|  |
| --- |
| **Position Details** |
| Full Time  Part Time If Part Time, Number of Work Hours Per week: |
| Regular  Temporary  Grant  Contract:  If Temporary or Contract, Number of Months:       (13 months to be eligible for full staff benefits for Contract positions) |

**Reason for this job description:**

Updated JAQ for HR files only  Change Position Title in its current classification

Requesting classification of a new position  Reclassification of a current position

**If requesting Reclassification,** briefly state reasons for the request and other relevant information regarding the position, including the significant changes in duties and responsibilities that justify reclassification. If necessary, a separate memo can be provided with this information. Please include a department/division organizational chart displaying how this position fits into the current (planned) reporting structure

Current Position Title:       Current Position number:       (SAP eight digits)

Proposed Title:

What existing NKU positions do you consider equivalent to this position?

What is the anticipated starting salary to attract a qualified candidate?

|  |  |  |  |
| --- | --- | --- | --- |
| Position’s Funding Source |  | | |
| Base Budgeted (X001) | Base Budgeted Revenue (X003) | | Salary Savings (For current FY Only) |
| Non Base (X006) | Non Base Revenue (X008) | | Operating Pool  CC#       GL# |
| Central Funding  Name of Project  Presidential Approval  (attach approval) | Grant Funded (X011)  Grant CC#  Grant# | | Reassignment of Position  To be eliminated  Position # |
| **Position Charging Information (Cost Override if different than 100% charged to Home Cost Center)** | | | | |
| Cost Override on Person | | Cost Override on Position | | |
| CC#:       Percentage       % | | CC#:       Percentage       % | | |
| CC#:       Percentage       % | | CC#:       Percentage       % | | |