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| --- |
| Organization Name |
|  Position Description |
| **Title of Position**  |

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|  |  |
| --- | --- |
| **Department:** *Optional*  | **Job Status:**   |
| **FLSA Status:** Exempt *or* Non-Exempt | **Reports To:**  |
| **Grade/Level:** | **Amount of Travel Required:**   |
| **Work Schedule:**  | **Positions Supervised:** |

*Considerations:*

* *FLSA Status: be certain to classify your position correctly, exempt or non-exempt. Consult with your human resources professional or review the* [*Department of Labor Fair Labor Standard Act Advisor*](http://www.dol.gov/elaws/esa/flsa/scope/screen9.asp) *thoroughly.*
* *Grade/Level: omit if you do not have a formal compensation system in your organization. May change to ‘Salary’ or’ Hourly Rate’; Salary +10% annual bonus; hourly rate + commission.*
* *Work Schedule: Days, Afternoons, Nights, 1st, 2nd, 3rd shift, as needed, on call, etc*
* *Job Status: regular full or part time; temporary full or part time. Be certain to define in your employee handbook what defines a full or part time employee, as well as a regular and temporary employee.*
* *Reports to: the person who supervises the employee on a daily basis, conducts performance evaluations.*
* *Travel: list a percentage. Example: 10% = 5 weeks a year.*
* *Positions Supervised: list the department or positions supervised or list ‘none’*

**POSITION SUMMARY**

*A brief description of the primary purpose for the position.*

**ESSENTIAL FUNCTIONS**

**Reasonable Accommodations Statement**

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. Reasonable Accommodations may be made to enable qualified individuals with disabilities to perform the essential functions.

**Essential Functions:**

* *List in order of importance.*
* *List regular duties and responsibilities, not goal focused duties. Goal focused responsibilities should be listed on the employee’s annual goal outline.*

**POSITION QUALIFICATIONS**

**Competencies:**

* *List competencies related to the position and skills necessary for the employee to be successful in the position. This is optional, but useful if you tie your competencies to the employee’s performance evaluation.*

**SKILLS & ABILITIES**

**Education:** *List the MINIMIMUM amount of education necessary for the employee to be successful in the position. You may indicate a preferred year of experience after your minimum.*

**Experience:** *List the MINIMIMUM amount of work related experience necessary for the employee to be successful in the position. You may indicate a preferred year of experience after your minimum.*

**Computer Skills:** *List the MINIMUM amount of computer skills necessary. List preferred skills*

**Certificates & Licenses:** *List any certificates and licenses REQUIRED for the employee to have to be hired or promoted in the position. Ex: driver’s license, hi-lo license, industry related certificate or license, etc.*

**Other Requirements:**

* *List other requirements in order of importance; ex: supervisory experience, knowledge of state or Federal, local laws related to position, first aid/CPR training, preferred education, preferred training, licenses, and/or certificates.*

 **PHYSICAL DEMANDS**

|  |  |
| --- | --- |
| **Physical Demands** *Select from list below for each* | **Lift/Carry**  |
|

|  |  |
| --- | --- |
| Stand  |  |
| Walk  |  |
| Sit  |  |
| Handling / Fingering  |  |
| Reach Outward  |  |
| Reach Above Shoulder  |  |
| Climb  |  |
| Crawl  |  |
| Squat or Kneel  |  |
| Bend  |  |

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|  |  |
| --- | --- |
| 10 lbs or less  |  |
| 11-20 lbs  |  |
| 21-50 lbs  |  |
| 51-100 lbs  |  |
| Over 100 lbs  |  |

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| **Push/Pull**  |
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|  |  |
| --- | --- |
| 12 lbs or less  |  |
| 13-25 lbs  |  |
| 26-40 lbs  |  |
| 41-100 lbs  |  |

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| --- | --- |
| **N (Not Applicable)**  | Activity is not applicable to this occupation.  |
| **O (Occasionally)**  | Occupation requires this activity up to 33% of the time (0 - 2.5+ hrs/day)  |
| **F (Frequently)**  | Occupation requires this activity from 33% - 66% of the time (2.5 - 5.5+ hrs/day)  |
| **C (Constantly)**  | Occupation requires this activity more than 66% of the time (5.5+ hrs/day)  |

 **Other Physical Requirements:** *List as necessary - ex: must wear steel-toed boots, must wear protective eye-wear, hearing protection, may work in outdoors during inclement weather, ability to travel by car or plane, high frequency of computer keyboarding, high frequency of viewing a computer monitor, etc.*

 **WORK ENVIRONMENT**

*EX:* Work is performed primarily in office, vehicles, and outdoor settings, in all weather conditions, including temperature extremes, during day and night shifts. Work is often performed in emergency and stressful situations. The noise level in the work environment is usually quiet in office settings and moderate in other situations.

Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Other (owner, president)* Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Company has reviewed this job description to ensure that essential functions and basic duties have been included. It is intended to provide guidelines for job expectations and the employee's ability to perform the position described. It is not intended to be construed as an exhaustive list of all functions, responsibilities, skills and abilities. Additional functions and requirements may be assigned by supervisors as deemed appropriate. This document does not represent a contract of employment, and the Company reserves the right to change this position description and/or assign tasks for the employee to perform, as the Company may deem appropriate.