

POSITION REVIEW, CLASSIFICATION & COMPENSATION FORM

PART I

Purpose: Please complete the request for "Position Review" including Part 1.A. This Position Review will establish the classification and compensation of the Position, and to create or update the existing position description.

I. REQUESTING DIVISION

| | |
|---|--|
| Division: | Department: |
| FLSA (<i>Leave Blank if a New Position</i>) <input type="checkbox"/> Exempt - <i>Comp-time (GS12+)</i> <input type="checkbox"/> Non-Exempt - <i>Overtime (GS11-)</i> | Position Title: Pos. ID/Job Code #: |
| FTE: <input type="checkbox"/> Faculty <input type="checkbox"/> Staff | Funding Source: <input type="checkbox"/> Grant <input type="checkbox"/> Local |
| Status: <input type="checkbox"/> Career <input type="checkbox"/> Contract | Name of Grant |

II. POSITION ACTION REQUESTED

- Classify New Position
- Review a vacant position: (Name & Job Title of Last Incumbent)
- Review a position with an Incumbent: (Name and Job Title of Incumbent)
- Other: (Update Job Description, FLSA Review, Demotion, etc.)

III. DIVISION/DEPT RECOMMENDATION (**Proposed or Changes to the Position**)

| | | | |
|-------------------|---------------------------------|-------------------------------------|------|
| Title of Position | | | |
| Pay Grade/Step | | Salary Range | |
| FLSA Status | <input type="checkbox"/> Exempt | <input type="checkbox"/> Non-Exempt | |
| Effective Date | Month | Day | Year |

IV. * POSITION BUDGET

| Base Salary | Fringes | Total Budget | % Allocated to Grant |
|-------------|---------|--------------|----------------------|
| | | | |

* Use FY Budget both local and grant for this portion.

V. DIVISION SIGNATURES – Approvals

Dean/Director: _____ **Date:** _____
Vice President _____ **Date:** _____

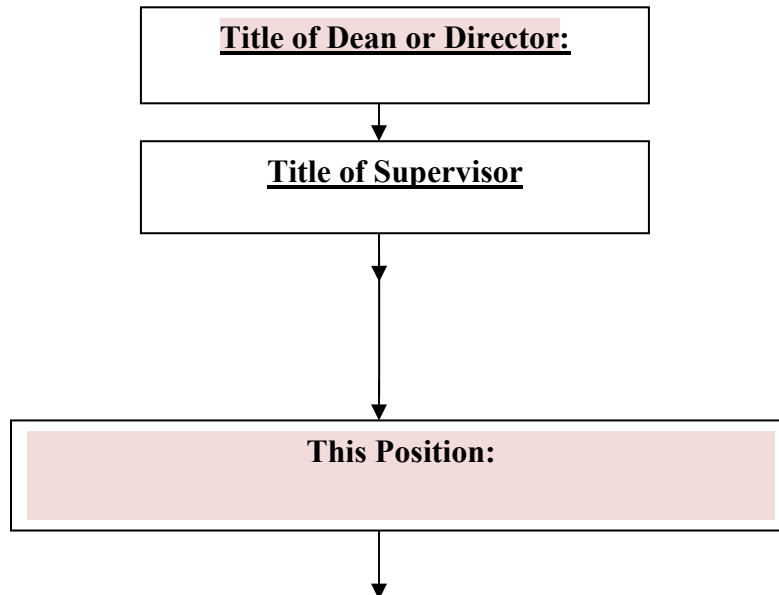
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PART I.A

I. Organization Chart for the Position

Please submit the following:

Attached is an organization chart for the position. Peer comparison are indicated below



List Peer Position *(same or comparable level positions within the Division or ASCC)*
Position:

Subordinate Positions/Direct Reports:
(Indicate name of employees and job titles:

| Employee Name: | Position: |
|----------------|-----------|
| | |

II. Position Summary (for New Position) or Summary Change (for existing Position)

Describe specifically why you want to create this position or how the duties of this position have changed in terms of job responsibilities.

- New Position to meet the mission of the Division
- Upgrade Position to Supervisory level
- Responsibilities and essential functions have changed
- Other: **NO POSITION REVIEW ON RECORD**

Summary:

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| | |
|--|--|
| | Activities & decisions are somewhat routine, requiring occasional independent action & judgment. |
| | Activities & decisions are varied in nature, requiring independent action & judgment in solving common problems. Unusual cases or questionable matters are resolved by this position's manager/supervisor. |
| | Activities and decisions are varied in nature. Requires solving both common and unusual problems. The position's supervisor's is consulted for clarification of policies only where needed. |
| | Activities and decisions are highly complex. Significant independent action and judgment are required subject to college-wide policies. |

VII. Budget Responsibilities

| | |
|---|---|
| Check Item(s) which best describe budget responsibilities. <input type="checkbox"/> Planning <input type="checkbox"/> Preparation <input type="checkbox"/> Maintaining <input type="checkbox"/> Monitoring | Position has signature Authority? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| If Yes, What is the dollar amount? | \$ |
| Total Division/Department Operating Budget: | \$ |
| Grants(s) Budget: | \$ |
| What is the total budget amount for which this position has responsibility? | \$ |
| Please indicate the number of employees in the department: | Staff: _____ Faculty: _____ |

VIII. Consequences of Errors

Describe the consequences of errors or the risks involved from decision made or action taken by this position.

- Impact the Institution Accreditation, Operations, Administration
- Impact to Division Operations/Administration
- Impact to the Operations of the Program
- Impact to the Grant
- Other

Additional Comments:

IX. Confidential/Sensitive Information

Does this position have responsibilities or dealing with information that would ordinarily be considered sensitive, privileged, or confidential? YES NO

Describe if YES:

X. Working Environment

Check the box that best describes this position's work environment

| | |
|--|---|
| | Work environment involves minimal physical risks. |
| | Work environment involves some physical risks and require following safety precautions. |
| | Work environment involves exposure to potentially dangerous chemical or materials and situations that require following extensive safety precautions, including use of protective gear. |

XI Work Experience/Educational Background

Indicate below the level of work experience you think may be required for this position. This information will be used to develop the Minimum Qualifications for this position. Check the applicable box for the required credential.

| | |
|--|--|
| | High School Diploma or Equivalent |
| | Some college, or Associate's Degree |

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| | |
|---|--------------------------------------|
| Bachelor's Degree | Field: |
| Master's Degree | Field: |
| Doctoral Degree | Field: |
| A combination of work experience including training and education, may be substituted for degree | Years of relevant Experience: |

Specify any area of training, content expertise, and/or licensure/certification ordinarily expected of a competitive candidate. *(Check the box and specific information as it pertains to this position)*

| | | |
|-------------------------------|--|--|
| Knowledge Of | <input type="checkbox"/> Applicable laws/policies/principles/etc... <input type="checkbox"/> Organization and its structure <input type="checkbox"/> Professional Knowledge in: _____ <input type="checkbox"/> Teaching Methodologies <input type="checkbox"/> Comprehensive knowledge of computers & technology <input type="checkbox"/> Other: _____ | |
| Skills & Abilities | <input type="checkbox"/> Analysis <input type="checkbox"/> Assessment/Evaluation <input type="checkbox"/> Communication-written & oral <input type="checkbox"/> Planning <input type="checkbox"/> Problem identification <input type="checkbox"/> Conflict resolution <input type="checkbox"/> Interpret policies/analyses/trends <input type="checkbox"/> Advising /Counseling <input type="checkbox"/> Teaching/Training <input type="checkbox"/> Scheduling <input type="checkbox"/> Staff Development <input type="checkbox"/> Research <input type="checkbox"/> Networking <input type="checkbox"/> Project Management <input type="checkbox"/> Public Speaking <input type="checkbox"/> Grant/Report Writing <input type="checkbox"/> Budget | <input type="checkbox"/> Gather and Input Data <input type="checkbox"/> Filing and Maintenance <input type="checkbox"/> Verifying/Proofreading <input type="checkbox"/> Compose Letters <input type="checkbox"/> Compute & Calculate <input type="checkbox"/> Multi-task <input type="checkbox"/> Stand long hours <input type="checkbox"/> Sit for long hours <input type="checkbox"/> Lift/Carry 20+ lbs <input type="checkbox"/> Work after hours <input type="checkbox"/> Travel <input type="checkbox"/> Multi-task <input type="checkbox"/> Follow required directions <input type="checkbox"/> Other Skills not Listed but required by the Position: _____ |
| Supervises Level | <input type="checkbox"/> Manages employees (varied levels) across divisions <input type="checkbox"/> Manages through multiple levels of subordinate supervisors <input type="checkbox"/> Leads one or more employees performing similar work <input type="checkbox"/> May oversee student, temporary workers <input type="checkbox"/> Other: _____ | |
| Nature of Work | <input type="checkbox"/> Administrative <input type="checkbox"/> Managerial <input type="checkbox"/> Professional/Paraprofessional <input type="checkbox"/> Project Management <input type="checkbox"/> Teaching <input type="checkbox"/> Trades/Labor <input type="checkbox"/> Other: _____ | |
| Cert/License | | |

XII. Additional Information

If this is a reclassification request for an incumbent, please justify and provide documentation.

(e.g. met the credential requirements of the position for the next grade, or received a degree for promotion).