

Position Description Information Worksheet

This worksheet is designed to assist you with the major components of Western's PageUp Position Description Form. There will be additional fields that will need to be completed in PageUp.

Type of Action Requested

Division/College: Choose an item.

Department Home Org Name:

Campus Location:

Position Information

Advertising/Working Title:

Position Number (If temporary leave blank)

Supervisor:

Current/Previous Incumbent:

Position Type:

If temporary, specify End Date: [Click here to enter a date.](#)

Appointment %:

If position is cyclic - Please specify how many months per year this position works? _____

For existing positions, what are the significant changes since this position was last reviewed?

Position Purpose, Functions, and Requirements

Position Summary/ Basic Function: Briefly summarize the *primary purpose* of this position in one paragraph:

Main Job Functions: List all the essential/marginal duties and the approximate percentage of time spent on each function over the course of a year below.

%	Duty/Responsibility	Essential/Marginal

Required Qualifications:

Preferred Qualifications:

Special Requirements / Conditions of Employment:

If this Position is considered essential personnel during suspended operations explain the duties and responsibilities that make this position essential:

Physical Demands:

- Bending Carrying Climbing Crawling Driving
 Grasping Lifting Pulling/Pushing Reaching Repetitive movements
 Sitting Squatting/Kneeling Standing Twisting Walking

Does this position perform hazardous tasks? Yes No

If you marked yes above, and this position performs hazardous tasks, the supervisor needs to ensure that a current hazard assessment of the department or shop's tasks is reviewed with the employee during onboarding. This will inform both the supervisor and employee of the proper personal protective equipment that needs to be issued before any hazardous tasks are performed. If you have any questions, please contact EHS at ext. 3064.

Position Questionnaire

What level of supervision does this position work under?

Choose an item.

What is the highest level of the relationship between this position and the employee(s) it supervises:

Choose an item.

What type of employees does this position supervise? (Check boxes)

- Does not supervise employees Students Temporary Employees
 Permanent Classified Staff Permanent Professional Staff

If Yes - What Positions & # of FTEs?

Does this position have fiscal or budgetary responsibilities?

Choose an item.

If Yes - What is the Total Fiscal or Budget Responsibility Dollars? _____

For Employee Requested Position Reviews for Classified Staff there are additional documents you must add to this Position Description in the Documents tab above. A full Overview of the process and documents can be found on the [Classified Staff Classification and Compensation](#) page. The following are the additional forms you will need:

[Employee Additional Form](#)

[Supervisor Additional Form](#)

Worksheet