Job Description

Read instructions carefully. Use continuation sheets if necessary.

Name (Last) (First) (MI)			Classification Title		Code
Department			Phone Ext.	Working Title	
Directorate		Bldg./Room	Start Date	In Present Job	Hrs/Wk
		0 1 7 774			
Supervisor			Supervisor's Title		Description Date
% Time	Characte	eristic Tasks Freque	encies (in order of impo	ortance)	
				,	

Responsibility, including method and frequency with priorities set.	which the work is reviewed, checked, supervised, or
Functional relationship to other workers and users of t	the product or service involved.
Responsibility, if any, for planning, scheduling, assign	ning, or overseeing the work of others.
Special skills, knowledge, or training required, include	ing tools or equipment used.
Unusual working conditions.	
his/her knowledge of the job, and then discuss any If appropriate, the worker may involve his/her stev	Date: rided by the supervisor and may revise it in light of differences with the supervisor to achieve agreement. ward in these discussions. If there is an unresolved
disagreement, the worker's description should be a Employee	

(Signature)

Use this page for continuation, if necessary.