

# POSITION QUESTIONNAIRE (EMPLOYEE)



The Position Questionnaire is used to gather details about the duties and responsibilities of your position in order to evaluate the appropriateness of job classification. After completing and signing the questionnaire, please give it to your manager or HR Partner for review and confirmation. It will then be forwarded to the Office of Compensation for final review and approval.

<b>Name:</b>	<b>Employee ID:</b>	<b>Date:</b>
<b>USC Job Title:</b>	<b>Department Business Title:</b>	
<b>Supervisor Name:</b>	<b>Department Name:</b>	

<b>Job Related Experience in Years:</b>					
<input type="checkbox"/> 0 – 1	<input type="checkbox"/> 2 – 4	<input type="checkbox"/> 5 – 7	<input type="checkbox"/> 8 – 10	<input type="checkbox"/> 11 – 14	<input type="checkbox"/> 15+
<b>Education:</b>			<b>Licensure</b>		
Degree			_____		
_____			Other (e.g. Accreditation, Workshop, etc.)		
Certification			_____		
_____			_____		

## POSITION SUMMARY

**Briefly describe in 2-5 sentences your responsibilities and associated duties performed on a regular basis. If relevant, mention the unit, program, or committee that you support:**

  
  
  
  

## MAJOR JOB RESPONSIBILITIES

In your own words, list assigned duties in the boxes below and indicate the percentage of time that is typically spent on each. The total percentage of time must equal 100%.

Job Responsibilities	% Time
1.	
2.	
3.	
4.	

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Job Responsibilities (continued)		% Time
5.		
6.		
7.		
8.		
<b>Total</b>		

I am authorized to decide who to hire and/or terminate  Yes  No

Indicate the number of direct reports under your supervision

Staff: \_\_\_\_\_ Non-Staff (Student or Resource Employees): \_\_\_\_\_

**\*The following section is required only for employees in sales or information technology positions.**

**My primary duties consist of:**

Obtaining orders for sales  Regularly being away from employer's location to conduct business

**Check all that is a primary responsibility:**

Programmer  Systems Analyst  Database Administrator  Software Engineer

Other (specify): \_\_\_\_\_

**Indicate the percentage of time that is devoted to each area below. The total percentage of time must equal 100%.**

Function	Percentage
Application Design	
Operating Systems Design	
Network Design	
Other Design Work (specify):	
Activities other than software or systems design	
<b>Total</b>	

## EMPLOYEE ACKNOWLEDGEMENT

I hereby certify that the above information is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

# POSITION QUESTIONNAIRE (SUPERVISOR)



## TO BE COMPLETED BY MANAGER/SUPERVISOR ONLY

Based on your business regimen and knowledge of the role, please indicate the minimum and preferred qualifications for this position irrespective of the current job description content or employee qualifications.

Job Related Experience in Years					
<b>Minimum</b>					
<input type="checkbox"/> 0 – 1	<input type="checkbox"/> 2 – 4	<input type="checkbox"/> 5 – 7	<input type="checkbox"/> 8 – 10	<input type="checkbox"/> 11 – 14	<input type="checkbox"/> 15+
<b>Preferred</b>					
<input type="checkbox"/> 0 – 1	<input type="checkbox"/> 2 – 4	<input type="checkbox"/> 5 – 7	<input type="checkbox"/> 8 – 10	<input type="checkbox"/> 11 – 14	<input type="checkbox"/> 15+
Education					
<b>Minimum</b>					
Degree			Licensure		
_____			_____		
Certification:			Other (e.g. Accreditation, Workshop, etc.)		
_____			_____		
<b>Preferred</b>					
Degree			Licensure		
_____			_____		
Certification			Other (e.g. Accreditation, Workshop, etc.)		
_____			_____		
<b>Other desired knowledge, skills, abilities:</b>					

## SUPERVISOR ACKNOWLEDGEMENT

\_\_\_\_\_  
Supervisor Name

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

### For Office of Compensation Use Only

Job Code:	Job Family:	FLSA:
_____	_____	_____