**HARVARD HUMAN RESOURCES**

Position Documentation and Questionnaire Form (PDF/PDQ)



**This form is being used for the purpose of:**

Job review/reclassification  New position classification

**Instructions:** Please review this form, and complete it as fully as you possibly can (not all sections of this form will be applicable to all positions.) Enter your responses in the gray sections below each question and return it to your manager and/or Human Resources Office upon completion.

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| EMPLOYEE INFORMATION | |
| Name:  Date:  Email:  Phone: | Department or unit:  Current job title and grade:  Requested job title and grade: |
| JOB SPECIFICATIONS­­ | |
| **JOB RESPONSIBILITIES** Please describe the primary role and function of the position in your department. Provide examples. This section can be written as a one paragraph job description. Please describe (outline) significant changes in the position:  **PRIMARY ROLE DESCRIPTION** Please identify specific duties and responsibilities and provide a breakdown of the approximate percentage (ideally not greater than 20% or less than 5%) of time spent, on average, on each duty (separate activities as opposed to grouping them).   |  |  |  | | --- | --- | --- | | Job activities | % of time | New duty or change? | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  |   Describe the department’s organization (to whom does the position report; who heads the department, etc.). Either write a description of the organizational chart in the gray box or attach a copy of the organizational chart to this document (Your supervisor or HR can help with this, if you do not have a chart).    Describe any similar positions within the department and how these positions interact with your position. Also include the reporting structure to the extent known. Please include as many positions as necessary to explain fully, and please include information about how your position is similar or different to others.    Describe the department’s role and function within the School/Unit to which you belong. Include any additional information about your department, if you feel it would be helpful. | |
| POSITION SCOPE AND IMPACT | |
| Explain the impact, to the extent possible, that the work of this position has within the department, inside Harvard and/or outside the University, if applicable.    Describe the constituents, both internal and external to Harvard, with whom this position works most closely. | |
| INDEPENDENT JUDGMENT AND DISCRETION | |
| Please provide examples of the types of problems that this position is responsible for solving independently. Indicate instances where it is necessary to use originality, creativity, fact finding, or analysis.    In what difficult situations does this position make independent judgments? In what situations would this position seek advice from a supervisor? | |

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| **JOB REQUIREMENTS** | | |
| LICENSES, SKILLS, AND EXPERIENCE  **­**Please list any specific education, training, or certification that is required for the successful performance of this job.    Describe any specialized equipment or technology used in this position, if applicable. ***If this position is an information technology job, please also complete the additional documentation section of this form.***      Indicate any education, specific degree, major, license, registration, or certification required, as you would in our online recruiting system, and why it is needed: | | |
| Degree | License | Certification |
| Major | Registration | Other |
| Why are these needed? | | |

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| **SUPERVISORY RESPONSIBILITIES** |
| Is this position responsible for managing a department or unit? If so, please name the department or unit.  No  Yes, department/unit:  Designate the type of staff this position supervises using the following categories: overtime eligible, exempt, temporary, Harvard student worker, and independent contractor. Please also note the number of individuals this position supervises.    Check off the primary supervisory responsibilities of this position.  Conducts interviews independently  Directs the work of other employees and assigns significant tasks. Provide an example:    Independently prepares and delivers performance evaluation(s)  Hires, transfers, promotes staff  Takes disciplinary action  Makes recommendations for termination |

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| FUNCTIONAL MANAGEMENT | |
| What responsibility does this position have for establishing, interpreting and/or implementing plans, policies  or procedures? Provide an example(s) that demonstrate this responsibility.    Describe the major financial decisions this position makes, and the effect that these decisions have on the overall operating or financial success of the unit, school, or the University.    Include the sizes(s) of the annual budget(s) for which this position is responsible: | |
| Operating | Capital |
| Non-federal sponsored research | Federal sponsored research |
| Endowment | Other (please explain) |
| If the position manages a segment of the department budget, indicate the line item(s).    How much authority for spending funds does this position have? Is there a maximum? Provide examples.    If this position manages grants and/or restricted funds, indicate the types of funds and numbers of each, stating dollar amounts.    Does this position have the authority to appropriate funds to different areas? If so, for which line item(s) in the budget?  No  Yes, name the line items: | |

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| COMMENTS AND SIGNATURES | |
| STAFF MEMBER’S COMMENTS Please provide any further comments you have about your position:  ­  ***Staff Member’s Signature:***  ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***Date:*** | |
| **SUPERVISOR’S COMMENTS**  Please provide comments about the accuracy and completeness of this form:    ***Supervisor’s Signature:***  ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***Date:******HR Department:***  By signing this document, you are acknowledging receipt.  Your signature does not indicate your opinion of the information contained in it. You will have further opportunity to contribute your opinion during the HR review process. |

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**Please note:**

**If you are an overtime-eligible staff member seeking reclassification of your position within the non-exempt grades, you have now completed this form. If this position is an information technology job, please also complete the following documentation section of this form.**

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| ADDITIONAL DOCUMENTATION FOR INFORMATION TECHNOLOGY POSITIONS ONLY |
| Does this position perform systems analysis techniques and procedures, including consulting with users to determine hardware, software, or system functional specification(s)? Provide an example of this.    Does this position design, develop, document, analyze, create, test, or modify computer systems or programs, including prototypes, based on and related to user or system design specifications? Provide an example of this.    Does this position design, document, test, create or modify computer programs related to machine operating systems? Provide an example of this.    Describe the types and amount of hardware, network and/or related equipment work for which this position is responsible.    What computer languages is this position responsible for utilizing? If programming, what is the percentage of time spent on this function? Include skill level (beginner, intermediate, or expert).   |  |  |  | | --- | --- | --- | | **Computer Languages** | **Skill Level** | **Time Percentage** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |

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| **Thank you for completing this form!** |

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| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **ADMINISTRATIVE SECTION FOR HR/MANAGERS ONLY** | | | | | | | | | | | | | | | | This section may be completed by Human Resources and/or the incumbent’s manager. Specific questions may be more applicable if a position is to be posted and/or funding for an existing position changed.  Today’s date:  **MAIN HR CONTACT** | | | | | | | | | | | | | | | | Name | | | | | | | | | Phone 617- | | | | Email @ | | | **SECOND CONTACT** | | | | | | | | | | | | | | | | Name | | | | | | | | | Phone 617- | | | | Email @ | | | Supervisor’s name, department, phone, email, ID#, office location, (use street address): | | | | | | | | | | | | | | | | Title | | | | | | | | | PeopleSoft group ID # | | | | | | | Dept. | | | | | | | | | Proposed work address | | | | | | | Is this a new position? | | | | | | | | | | | | | | | | Yes | | | | | | | | | | | | | | | | No | | If no, name the last incumbent: | | | | | | | | | | | | | | Is this a request for a position review? | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | | Yes | | If yes, please complete incumbent data below: | | | | | | | | | | | | | | Current incumbent’s name | | | | | | | |  | | | | | | | | Incumbent’s phone | | | | | | | |  | | | | | | | | Incumbent’s email | | | | | | | |  | | | | | | | | Current salary grade | | | | | | | |  | | | | | | | | Current job function | | | | | | | |  | | | | | | | | Current job class code | | | | | | | |  | | | | | | | | Hours per week | | | | | | | |  | | | | | | | | Proposed work schedule | | | | | | | |  | | | | | | | | Is there a candidate in mind? Yes No | | | | | | | | | | | | | | | | **ENTER CANDIDATE INFORMATION BELOW:**  Last name:       First name:  Affirmative Action goals for job posting:  Has this position been approved in your budget? Yes No | | | | | | | | | | | | | | | | Yes | | | No | | | Will this position have unsupervised access to dorms, valuable artifacts, drugs, radiological materials, or animal care facilities? | | | | | | | | | | Yes | | | No | | | Will this position supervise minors (under age 18) in the regular course of duties? | | | | | | | | | | Yes | | | No | | | Will this position have access to highly sensitive or confidential data systems? | | | | | | | | | | Yes | | | No | | | Will this position have access to aggregate credit card data? | | | | | | | | | | Yes | | | No | | | Will this position have the ability to authorize and/or approve transactions of $50,000 or more? | | | | | | | | | | Is this position grant funded? Yes No  Is the position ARRA funded? Yes No | | | | | | | | | | | | | | | | Is this position a term appointment? Yes No  If yes, what is the term of this position? | | | | | | | | | | | | | | | | Budgeted salary range: Min: $      Max: $ | | | | | | | | | | | | | | | | Budget code | | | | 999-99999-9999-999999-999999-9999-99999 | | | | | | | | | | | | Comments: (is this a job share, flexible hours available, etc.) | | | | | | | | | | | | | | | | If sent to **Labor Relations:**       Approval | | | | | | | | | | | | **Compensation:**       Approval | | | | APPENDIX FOR HR/MANAGERSThis section may be completed by those working in the Medical Area. | | | | | | | | | | | | | | | | **ENVIRONMENTAL HEALTH AND SAFETY**  Will this position be working with animals? | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | | Yes | | | If yes, check off the animal species type below: | | | | | | | | | | | | |  | Cats | | | | |  | Guinea pigs | | | | | | | | |  | Dogs | | | | |  | Hamsters | | |  | Rats | | | | |  | Fish | | | | |  | Mice | | |  | Sheep | | | | |  | Frogs | | | | |  | Non-human primates | | |  | Other | | | | |  | Gerbils | | | | |  | Rabbits | | |  |  | | | | | Will this candidate be exposed to any toxic, radioactive, or infectious materials?  No  Yes, please list: | | | | | | | | | | | | | | | | Will this candidate be exposed to human blood, primary tissue, or cell lines?  No  Yes | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |