

**MSUAASF
POSITION DESCRIPTION**

CAMPUS HUMAN RESOURCES USE ONLY

Current Range: _____ PCN: _____
 FLSA Status: _____ Organizational Level: _____
 Date Received In Human Resources: _____

MN State Colleges & Universities

OFFICE OF THE CHANCELLOR USE ONLY

Range Determination: _____
 Date of Range Determination: _____
 Career Family Code: _____

Employee Name: _____

University: _____

Area & Section: _____

Department & Program: _____

Position Title: _____

Assignment Specialty, if applicable: _____

*Note: (Attach a detailed **organizational chart** which clearly indicates reporting relationships and organizational context.)*

Employee Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____

Supervisor's Title: _____

Appropriate President/Vice President/University Designee's
 Signature: _____ Date: _____

University Designee's Title, if applicable: _____

DIMENSIONS:

Operating Budget: \$ _____ (not including salaries)

Supervision:

	Number of People Directly Supervised		Total People Supervised (directly and indirectly)		Salary Budget
	Head count	FTE	Head count	FTE	
State Employees					
Student Employees*					
Totals					

* including Work Study, Interns, Graduate Assistants, etc.

Position Assigned to Work: indicate number of months per year: _____ months/year;

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indicate whether full or part-time: _____ full time; _____ part-time

Please identify any special working conditions such as the requirement to "live-in," on-call duty, evening assignments, etc.

Physical requirements (e.g. lifting and carrying equipment and materials, required overnight travel, etc.)

POSITION SUMMARY (One or two sentences summarizing the primary purpose for which this position exists):

DUTIES AND RESPONSIBILITIES:

(Percent of time should reflect time over the course of a year. Add rows to the table or use additional sheets as necessary to provide a detailed description of these responsibilities.)

Resp. # % of time Description of duties and responsibilities

1		
2		
3		
4		
5		
6		
7		
8		

QUALIFICATIONS FOR APPOINTMENT Knowledge, skills and abilities required to perform duties and responsibilities described above:

REQUISITE EDUCATION AND EXPERIENCE (Enter minimum number of years of formal
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education and/or experience which are required to perform the duties listed above. Do not list preferred qualifications, or an incumbent's current educational qualifications.)

Education:

Professional Licensure/Certification:

Experience: # of years _____ type of experience:

Which types of experience might be substituted for the education requirements?

Other Special Requirements:

This description is not intended to limit or in any way modify the right of any supervisor to assign, direct and control the work of employees under her/his supervision. The use of a particular expression or illustration describing duties shall not be held to exclude other duties not mentioned that are of similar kind or level of difficulty.