

Position Profile Form

Position Profile Review Request Process

Position Descriptions are a form of job documentation. They summarize the most important features of a position including the general nature of the work performed, the specific responsibilities (essential functions) and the skills and knowledge required to do the job.

The position profile guides you through the process of explaining your position. Once you have completed the position profile your position will be evaluated, if the position has changed, and used to develop your official job description.

Position Profile

The Position Profile Form should be used to describe the duties of a specific position. Reasons for completing a Position Profile:

- 1) Reclassification Requests
- 2) New Position Requests
- 3) Interim Assignment Reviews, as necessary
- 4) FTE Changes, as necessary
- 5) Other - (e.g. review of exemption status)
- 6) Department wants to get an updated Position Profile on file with Human Resources

Reasons 1 thru 5 above also require that the department complete the Position Profile Review Request Form, explained below.

Completing the Position Profile Form

Using the Position Job Profile Template complete the following sections: (Included in this document)

Summary of Position

This should be a brief statement that describes the overall purpose of the position and why it exists, plus the summary of the position should include:

Exempt	Non Exempt
judgment and decision making	complexity of duties
scope and degree of analysis required	mental-visual demands
degree of initiative and creativity required	supervision received
consequence of potential errors on the operation of the department and/or College	personal contacts
nature, purpose and level of College and public contacts	effect of error or confidential nature of position
accountability for results	scope of supervision of subordinate employees
basic knowledge required	basic knowledge required
minimum related ability or experience required	minimum related ability or experience required

Essential Functions

List task statements that describe only the major duties for which the position is accountable. Limit the tasks to 10 or less statements using action verbs that describe the function. Think of “What the position does”, “How it is done”, and the “Reason”, or “End Result”. State approximate percent of total time or frequency spent on each function. A glossary of job description terms and their definitions is attached.

Minimum Qualifications

Only the minimum requirements needed to perform the job should be listed.

Skills and Qualifications must link back to the job duties of the position.

1. Describe the minimal education or training that would be required for a new employee coming into the position. If a degree is required please also add (where legally possible), “or an equivalent combination of relevant education and experience may be substituted in lieu of the degree.”
2. List the critical skills or special knowledge that is required to perform the position successfully. Skill is an acquired behavior or level of proficiency needed to perform a work assignment (i.e., typing skill, programming skill, able to lift 50 lbs, etc).
3. Minimum years of experience must be indicated.

Physical Requirements

List any physical requirements that are “essential” to perform the job and the approximate percentage of time devoted to the physical activity.

Organizational Information

Fill in the boxes with the appropriate information as indicated.

Supervisory Information

If the position is supervisory in nature check the appropriate boxes that best describe these duties. To check the appropriate box on the form, double click in front of the box. This will bring up a box that will allow you to check or uncheck the box you want.

Additional Information

Provide additional information that is believed to be important about the position that may not have been captured elsewhere on the form.

MACALESTER COLLEGE

POSITION PROFILE

Date: _____

If Position Profile is being completed for classification review or new position creation a "Position Profile Review Request" form must be completed.

CURRENT POSITION INFORMATION

Position Title	Position Number
Person Completing - Name and Phone #	Department

SUMMARY OF POSITION (Brief statement describing the nature and purpose of the job.)

Does this position require that the employee live on campus? Yes No

ESSENTIAL FUNCTIONS (Limit to 10 tasks or less)

(Broad statements describing major job responsibilities.)

FREQUENCY %

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

Total 100%

MINIMUM QUALIFICATIONS (Please state the minimum requirements necessary to perform this position.)

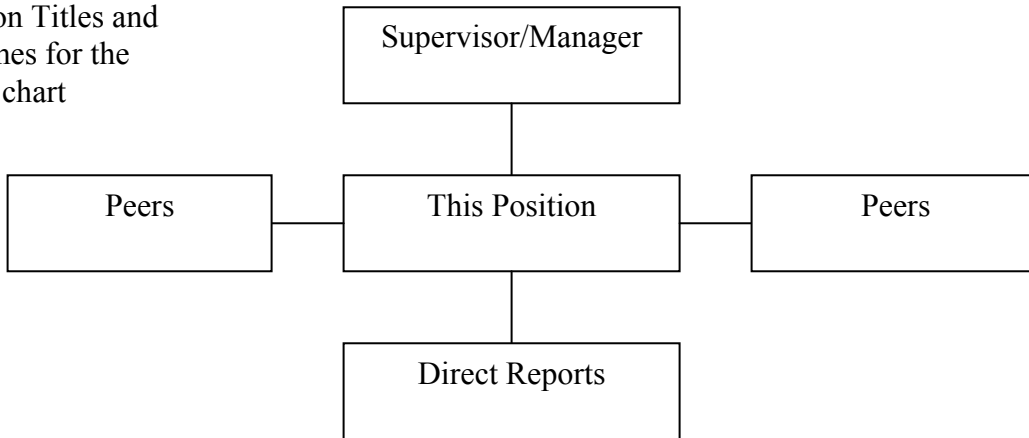
EDUCATION/EXPERIENCE:

SPECIAL SKILLS/KNOWLEDGE/ABILITIES

PHYSICAL REQUIREMENTS

ORGANIZATIONAL INFORMATION

Provide Position Titles and Employee Names for the organizational chart



SUPERVISORY INFORMATION

If this position requires Supervision of other employees, please check the items below that best describe these duties. To check the appropriate box - double click in front of the box. This will bring up a box that allows you to check or uncheck the box.

- Assign work, give directions, answer questions
- Discharge Employees
- Hire Employees
- Conduct performance evaluations/reviews
- Discipline Employees
- Orient New Employees
- Other: (please describe) _____ # of employees supervised: _____

ADDITIONAL INFORMATION

APPROVALS

Employee	Supervisor
Line Officer	Human Resources

Position Profile Review Request Form

This form should be completed to request a review of either a current position or a new position. If an updated Position Profile is not on file with Human Resources, an updated one should accompany this form.

Using the Position Profile Review Request Template complete the following sections:

Section A. Reason For Request

To check the appropriate box on the form, double click in front of the box. This will bring up a box that will allow you to check or uncheck the box you want.

- New Position – check this box if you are requesting a review of a new position requiring assignment of a position number and salary grade (Line Officer and Director of Budget & Finance approval is required)(Complete part of Section B)
- Reclassification – check this box if you are requesting a reclassification on an existing position (Line Officer approval is required) (Complete Section B and C)
- Interim Assignment Review – check this box if a current employee will be taking on some or all of the responsibilities of another position for an interim time period (Line Officer approval is required) (Completed Section B and E.)
- FTE Change – check this box if you are requesting a change in the positions FTE (Line Officer and Director of Budget & Finance approval is required if increasing FTE that is not budgeted) (Complete Section B and D)
- Other – check this box for any other types of requests not covered above. Indicate specifics.

Section B. Current Employee/Position Information

The following information should be completed for all requests except for New Position requests:

- Employee Name
- Current Job Title
- Current FTE

The following information should be completed for all requests:

- Months of Appointment
- Account Number
- Department
- Supervisor's Name
- Supervisor's Extension

Section C. Reclassification

This section needs to be completed when requesting a reclassification on an existing position. Please provide the position title. Summarize rationale for the review and changes in the position responsibilities.

Section D. FTE Change/Request

This section needs to be completed when requesting a change in the positions FTE. Provide the FTE you are requesting the position be changed to and the effective date of the change. If this change results in a significant change in job responsibilities, please explain.

Section E. Interim/Acting Assignment Requests

This section needs to be completed when a current employee will be taking on some or all of the responsibilities of another position for an interim time period. If the employee will be assuming 100% of the interim position, please explain how this will affect the employee's current position. If the employee will be assuming only part of the interim position, please provide details of the interim duties to be assigned. For short-term additional assignment, please explore the Contingent Pay Program.

MACALESTER COLLEGE POSITION PROFILE REVIEW REQUEST

Date of Request: _____

For Human Resources Use Only	
Position Title	
Position Number	
PayGrade	
Date Received by HR	
Effective Date	

Please complete sections A and B below, then complete C, D, or E as appropriate.

Section A. CHECK APPROPRIATE BOX INDICATING THE REASON FOR YOUR REQUEST		
To check the appropriate box - double click in front of the box. This will bring up a box that allows you to check or uncheck the box.		
<input type="checkbox"/> NEW POSITION (Line Officer & Dir Budget & Finance approval required)	<input type="checkbox"/> RECLASSIFICATION (Line Officer approval required)	<input type="checkbox"/> INTERIM ASSIGNMENT REVIEW (Line Officer approval required)
<input type="checkbox"/> FTE CHANGE (Line Officer & Dir Budget & Finance approval required if increasing FTE that is not budgeted)	<input type="checkbox"/> OTHER	

Section B. CURRENT EMPLOYEE/POSITION INFORMATION			
Position Number	Employee Name (if vacant please indicate)		
Current Job Title	Current FTE		
Months of Appointment (regular, 9, 10,....months)	Budget/Funding/Grant Number		
Department	Supervisor's Name	Supervisor's Extension	

Section C. RECLASSIFICATION
If requesting a reclassification to an existing position, please provide the position title: Summarize rationale for the review and changes in job responsibilities.
Current Position Profile or Position Description on file with Human Resources? <input type="checkbox"/> Yes <input type="checkbox"/> No If, no please complete Job Profile and submit with request.

Section D. FTE CHANGE/REQUEST
FTE Requested: _____ Effective Date: _____ Does this result in any significant changes in job responsibilities? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain

Section E. INTERIM/ACTING ASSIGNMENT REQUESTS
Will the employee assume 100% of the interim position? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how will this interim assignment affect the Employee's current position? If no, provide detail of interim duties to be assigned.
Anticipated dates of the interim appointment: Beginning Date: _____ End Date: _____

APPROVALS	
Supervisor	Line Officer
Director of Budget & Finance (if needed)	Human Resources