Your Name:						
Your Job Title:						
Department:						
Division:						
Supervisor's Name:	Supervisor's Name:					
Supervisor's Job Title:						
 JOB DUTIES REVIEW The Job Duties Review (JDR) form is a management tool to assist in staffing determinations. Completed forms with management approval may be submitted to Human Resources at the time of department staffing plan review. Instructions List and describe your most important essential job duties and responsibilities. Duties should be described in your own words. Language taken directly from job descriptions 						
	will not be accepted. Start with the duty or responsibility that takes the <i>largest amount</i> of your time each year					
3. Describ						
4. Indicate	Indicate <i>about how often</i> you perform each duty (daily, weekly, etc.).					
5. Indicate the <i>percentage of your overall time</i> in a year that you spend on each duty. Percentages should total 100%.						
1.						
Арр	roximate Frequency	Annual Percentage				
Daily (or aln	nost daily)					
Weekly (or a	almost weekly)					
Monthly (or	almost monthly)					
Quarterly (a	bout 4x a year)					
Infrequently	or Occasionally					

2.			
Approximate Frequency	Annual Percentage		
☐ Daily (or almost daily)			
Weekly (or almost weekly)			
Monthly (or almost monthly)			
Quarterly (about 4x a year)			
☐ Infrequently or Occasionally			
Approximate Frequency	Annual Percentage		
Daily (or almost daily)			
Weekly (or almost weekly)			
Monthly (or almost monthly)			
Quarterly (about 4x a year)			
☐ Infrequently or Occasionally			
4. Approximate Frequency Annual			
Approximate Frequency	Annual		
	Annual Percentage		
Daily (or almost daily)			
Daily (or almost daily) Weekly (or almost weekly)			
☐ Daily (or almost daily) ☐ Weekly (or almost weekly) ☐ Monthly (or almost monthly)			
Daily (or almost daily) Weekly (or almost weekly)			

5.			
Approximate Frequency	Annual Percentage		
Daily (or almost daily)	7 0. 001114450		
Weekly (or almost weekly)			
Monthly (or almost monthly)			
Quarterly (about 4x a year)			
☐ Infrequently or Occasionally			
Approximate Frequency	Annual Percentage		
Daily (or almost daily)			
Weekly (or almost weekly)			
Monthly (or almost monthly)			
Quarterly (about 4x a year)			
Infrequently or Occasionally			
7.			
Approximate Frequency	Annual Percentage		
Approximate Frequency			
Approximate Frequency Daily (or almost daily)			
Approximate Frequency Daily (or almost daily) Weekly (or almost weekly)			

8.	
Approximate Frequency	Annual Percentage
Daily (or almost daily)	
Weekly (or almost weekly)	
Monthly (or almost monthly)	
Quarterly (about 4x a year)	
☐ Infrequently or Occasionally	
9.	
Approximate Frequency	Annual Percentage
Daily (or almost daily)	
Weekly (or almost weekly)	
Monthly (or almost monthly)	
Quarterly (about 4x a year)	
Infrequently or Occasionally	

Responsibility for the Work of Other City Employees

Read	d ea	ach statement carefully and check the one that most accurately describes your job.
	1	. I have no supervisory or lead responsibility.
	2	Lead/Crew Leader: I plan, schedule and assign tasks; provide "what, how or why" direction; ensure work is completed according to proper procedure; monitor work progress and review results. I also serve as a technical expert in my work unit.
	3	3. First Line Supervisor: I schedule, supervise, and evaluate the work of my employees. In addition, I participate in human resource actions such as selecting new employees, discipline and termination for those employees who report to me.
	4	Second-Line Supervisor: I assist the manager of a work group in the day-to-day management of staff. I am responsible for directing and evaluating the work of first-line supervisors, as well as the staff reporting to the first-line supervisors. I recommend human resource actions such as hiring, discipline, termination and pay changes for first-line supervisors and their staff.
	5	Third-Line Supervisor: I am responsible for first-line and second-line supervisors and their staff in a section within a division. In addition to the Human Resources responsibilities listed above, I am also responsible for formulating operating budgets for my assigned area.
	li	f you selected any option other than #1, please list the classifications you lead or supervise and the number of employees in each:
Resp	on	sibility for Contractors, Vendors, or Volunteers
Read	d ea	ach statement and check all that apply to your current job.
	1.	None: I am not responsible for the work of any contractors, vendors, or volunteers.
	2.	Vendor Selection: I solicit short-term bids from vendors, define specifications, recommend vendor selection, and place orders.
	3.	Daily Supervision/Coordination: I oversee the work of on-site contractors or volunteers.
	4.	Technical Expert: I provide technical expertise and guidance to contractors on a regular or ongoing basis.
	5.	Contract Monitoring: I ensure that the terms of a contract are met by monitoring and evaluating contractor performance.
	6.	Contract Managing: I define the terms of contract agreements and ensure work is completed satisfactorily. I can authorize payment to contractors based on my evaluation of the work performed.
	7.	Other:

Financial Responsibility

Read	each statement and check all that apply to yo	ur current job.			
	• Financial Transactions: I collect funds or make payments (by cash, check, credit card, or transfers) on behalf of the City. I am responsible for ensuring that the amounts I receive or pay out are accurate.				
	Budget Monitoring: My work involves using financial knowledge and business understanding to monitor, identify, and act on potential financial overruns and variances at an early stage.				
	Program Budgeting: I am responsible for planning, preparing, monitoring, and managing the budget for an ongoing City program, long-term project, or a section of a division.				
	If checked, <i>provide recent examples</i> of the prog for:	gram, project or section you are responsible			
	 Division Budgeting: I am responsible for plannin budget for a division. 	g, preparing, monitoring, and managing the			
!	Department Budgeting: I am responsible for planning, preparing, monitoring, and managing the budget for a City department.				
	5. Other (specify):				
	7. None				
Signa	ture of employee providing information above	Date			
Signa	ture – Supervisor/Manager*	Date			
Signa	ture – Director*	Date			

^{*}Anyone other than employee signing this form is <u>only</u> attesting to the accuracy of the duties information, and should provide any correcting or clarifying remarks as warranted.