

PDQ/CBQ Questionnaire - Supervisor's Section

Sections A through D are to be completed by the incumbent's immediate supervisor.

Please complete and sign this form digitally, or print and sign, then forward to your HRM for processing.



SECTION A - ORGANIZATIONAL STRUCTURE

Incumbent's Name:

Your Name:

Position Number:

Your Title:

Department:

Your Position #:

Division:

Your Supervisor:

Names and titles of all subordinates reporting to you:

Supervisor's Title:

SECTION B - POSITION INFORMATION

1. Are all statements made in the employee's section correct? YES NO
Please indicate any additions or exceptions.

2. What are the most important or critical duties of this position? *Please explain.*

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3. What are the most difficult or complex duties of this position? *Please explain.*

4. Has this position acquired duties from other positions? YES NO
If yes, please identify duties and positions.

5. Have any duties of this position been assigned to someone else? YES NO
If yes, which duties and who performs them now?

6. What knowledge, skills, and abilities will an incumbent need to perform the duties of this position competently?
Indicate if a license or certification is required.

SECTION C - REQUEST FOR POSITION CLASSIFICATION/PAY GRADE REVIEW

1. Requested classification or exempt paygrade:
2. Who initiated the request for a review:
3. Reasons for the request:

4. Do you feel that the position should be reclassified (or exempt pay grade changed)? YES NO
Please explain.

SECTION D - SUPERVISOR SUPPLEMENTAL QUESTIONS

1. How much latitude is the incumbent given to make decisions?
What types of decisions need to be referred to you or others?

2. How do you review and monitor their work?
How much supervision is needed? Has this decreased since they started?

3. Who determines the priority of the incumbent's projects? Who establishes the time frames and deadlines?

4. Please compare incumbent's position to any comparable positions and provide name(s) or position #(s).
Please include similarities/differences in functions, decisions, problems, etc.

5. *Notes or additional information (complete only if needed)*

SECTION E - SUPERVISOR SIGNATURE

To the best of my knowledge, all information in both sections of this PDQ/CBQ (unless noted above) is accurate and complete.

Supervisor's Signature

Date Signed

Complete the SUPERVISOR SECTIONS and QUESTIONS above before signing.