

BELLINGHAM PUBLIC SCHOOLS
Bellingham, Washington

POSITION ANALYSIS QUESTIONNAIRE
SUPERVISOR REVIEW FORM

To the Supervisor:

Thank you for completing the attached forms for employees who report to you.

YOUR NAME (SUPERVISOR) _____

YOUR JOB TITLE _____ DATE _____

EMPLOYEE'S NAME _____

EMPLOYEE'S JOB TITLE _____

SCHOOL/DEPARTMENT _____

1. Do you agree that the description of the duties and the responsibilities of the position provided by the incumbent is accurate?

Yes No

If no, please indicate discrepancies: _____

2. If the employee supervises other staff, please indicate the level of supervision by checking the most appropriate response.

- a. Assigns work and sets daily time schedules.
- b. Reviews work for accuracy and correctness.
- c. Contributes to decisions concerning employment, discipline, termination, and evaluation.
- d. Responsible for completing annual evaluation and submitting it to personnel.
- e. Responsible for recommending employment discipline or termination without requirement for approval by immediate supervisor.
- f. Not applicable to this position.

Comments: _____

3. If the employee manages a budget, please indicate the type of management responsibility by checking the most appropriate response.

- a. Monitors budget expenditures for supervisor.
- b. Makes budgeted expenditures subject to supervisor's approval.
- c. Has authority to expend monies within budget without supervisor's approval -- develops recommendations for budget for supervisor.
- d. Final responsibility for developing annual budget for division or department and recommending to top level administration.
- e. Not applicable to this position.

Comments: _____

4. What types of decisions can the position incumbent make on his/her own?

5. Describe the consequences to the school/department or district of a decision error by the incumbent in this position.

6. Please indicate the background and experience required to fulfill this employee's job to a full level of proficiency.

a. Education:

	How long?	Diploma, Certificate, Degree or Areas of Study
High School	_____	_____
Vocational/Technical School	_____	_____
College	_____	_____
Other	_____	_____

b. Prior work experience (not including on the present job):

	How long?	Job, Specialization, or Type of Experience
Skilled trades	_____	_____
Clerical specialties	_____	_____
Professional/Technical	_____	_____
Supervisory/Managerial	_____	_____
Other	_____	_____

c. Comments: _____

Signature: _____

Date: _____