

YOUR COMPANY NAME
Position Description

Job Title: _____ Date: _____

Incumbent(s) Name: _____ Code: _____

Classification:

Exempt

Non-Exempt

Reports To: _____

Approved: _____

Incumbent

Supervisor

Human Resources Dept.

SUMMARY: _____

PRIMARY ACCOUNTABILITIES AND/OR FUNCTIONS: _____

ESSENTIAL FUNCTIONS: _____

WORK ENVIRONMENT: _____

KNOWLEDGE AND SKILL REQUIREMENTS: _____

SUPERVISION: _____

Exercised: (by this position):

Received (freedom to act):

FINANCIAL IMPACT AND/OR DIMENSIONS: _____

CONTACTS: _____
