



**TEXAS WOMAN'S**  
UNIVERSITY™

*Office of Human Resources*  
*Compensation*

**Job Analysis Questionnaire (JAQ)**

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**SECTION 1: RECLASSIFICATION OF AN EXISTING POSITION**

**Reclassification of an existing position**

Title **does not exist** in Compensation Pay Plan complete entire JAQ.

Title **exists** in the Compensation Pay Plan complete Section 2, 3, 5, 12 **only**.

**If a draft job description has been created**, attach and complete Section 2, 5, 11, 12 **only**.

**SECTION 2: Current Information**

**Division Name:**

**Department Name:**

**Current Title:**

**Current Salary:**

**Current Employee:**

**FTE:**

**SECTION 3: Proposed Information**

**Proposed Title:**

**Proposed Salary:**

**FTE:**

**Are funds available for the Reclassification?**

**Funding Source:**

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**SECTION 4: Instructions**

The purpose of the questionnaire is to obtain current information on a specific job based on a review of the job duties and responsibilities. Please complete this questionnaire as accurately as you can. Base your responses on what is normal for the job and not special or temporary assignments. The form is not intended to measure job performance, but focuses on the job. The results of the questionnaire are used to develop a formal job description and help assign the appropriate pay for the position. Route the questionnaire through the approval signatures listed at the end of the JAQ. These signatures are necessary for the review of the request. If the Divisional Vice President/VP Provost agrees for the Office of Human Resources to conduct the job analysis, the Divisional Vice President/VP Provost will then forward it to the Office of Human Resources.

Once the review has been conducted a Compensation Team Member will contact you with the results. If the request is recommended for approval it will go through a final approval of

signatures: HR, AFS (if an Academic Affairs position), Budget Office verification, Divisional Vice President, and Sr. Associate VP for HR/CHRO.

A notification email with further instructions will be sent upon final approval.

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## **SECTION 5: Reclassification of Current Position**

How has the position changed?

What has been added?

What has been deleted?

## **SECTION 6: Job Summary**

Summarize the purpose of the position. Why does the job exist?

## **SECTION 7: Essential Duties and Responsibilities & Additional Duties**

Essential functions are the fundamental job duties performed in a position. A function may be essential because the position exists to perform that duty. List essential duties in order of importance.

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|  |
|--|

### **Additional Duties**

Other duties that may be considered minor or occasional duties and may be performed by someone else.

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|--|
|  |
|--|

## SECTION 8: Education, Experience and License(s)/Certification(s)

Indicate the required minimum level of education necessary to effectively perform the job's essential duties.

### Level of Education

High School Diploma or GED  
Vocational/Technical Diploma  
Some College  
Associate's Degree  
Bachelor's Degree  
Master's Degree  
Doctorate Degree  
Other  
Preferred:

### Experience

Indicate the required minimum years of experience and type of experience necessary to effectively perform the job. (Example: Accounting experience in higher education). List preferred experience.

### License(s)/Certification(s)

Indicate special license(s) and certification(s) that are required. (Example: CPA required). List preferred.

## SECTION 9: Knowledge, Skills, and Abilities

Identify the Knowledge, Skills, and Abilities (KSAs) that are necessary to perform successfully in this position.

*Knowledge – Information that an employee should know at the time he or she is hired or moved into the job. Knowledge represents information that are applied directly to the performance of work functions. (Example: Knowledge of finance and accounting principles).*

*Skills – Technical or manual proficiencies which are usually learned or acquired through training. (Example: Must be proficient in the use of a personal computer and Microsoft Office Suite).*

Abilities – Capabilities and talents necessary to perform the job. (Example: Ability to communicate effectively, orally, by phone, in person, and in writing).

**Knowledge, Skills and Abilities**

**SECTION 10: Organizational Relationships**

Which position title does this position report to?

Does this position supervise regular employee(s)? **YES**                      **NO**

If yes, list titles.

**Please include an organizational chart with this request.**

**Supervision Received**

Please indicate the level of supervision that this position receives by selecting the appropriate level below:

**Immediate Supervision**

Works in the presence of your supervisor with regular checking and review by supervisor; or duties are routine.

**General Supervision**

Works without direct supervision under standard operating procedures; however, supervisor is close by to answer questions or handle problems.

### Moderate Direction

Works with general instructions regarding the scope of the approach to projects or assignments, but the procedures and techniques to use are left to your discretion. This category is usually for technical and professional positions where employees operate with a reasonable degree of independence and decision making.

### General Direction

Is responsible for a program or function and are expected to carry out necessary activities without direction. Uses a high degree of independence and decision making. This category is usually for Managers/Department Heads and above and for high-level staff.

### Administrative Direction

Has broad management responsibility for a large program or set of related functions. Uses full independence and decision making. This category is usually reserved for Department/Division Heads and above.

## SECTION 11: Work Environment & Physical Demands

Different jobs perform duties in a variety of working environments. Please indicate the work environment of this position by checking all that apply.

| Work Environment  |
|---|
| <b>Office Environment:</b> Work is normally performed in a typical interior work environment.   |
| <b>Outdoor Environment:</b> Employees work outdoors and may not be protected from weather conditions.   |
| <b>Extreme Cold:</b> Temperature typically below 32 degrees for more than an hour.  |
| <b>Extreme Heat:</b> Temperature typically above 100 degrees for more than an hour.   |
| <b>Noise:</b> There is sufficient noise to cause you to shout in order to be heard above the noise level.                                     |
| <b>Vibration:</b> Exposure to oscillating movements of extremities or whole body.   |
| <b>Atmospheric Conditions:</b> Conditions that affect the respiratory system, such as fumes, odors, dusts, mites, gases, or poor ventilation. |

| Work Environment   |
|--|
| <b>Hazards:</b> Include a variety of physical conditions, such as proximity to moving mechanical parts, moving vehicles, electrical current, working on scaffolding and high places, or exposure to chemicals. |
| <b>Infectious Diseases:</b> Employees are frequently exposed to contagious or infectious diseases.   |
| <b>Oils:</b> There is air or skin exposure to oils or other fluids.  |
| <b>Exposure to Animals:</b> Works in laboratories with animals.  |
| <b>Close Quarters:</b> Employees are frequently required to work in crawl spaces, shafts, man holes, sewage and water lines pipes, and other areas that could cause claustrophobia.                            |

**Other:**

## Physical Demands

Different positions require a variety of physical demands. Please check all the physical demands that apply to the position.

|                                 |                       |                       |                 |           |
|---------------------------------|-----------------------|-----------------------|-----------------|-----------|
| Repetitive hand motion          | Hearing, listening    | Talking               | Walking         |           |
| Bending                         | Stooping              | Crouching             | Crawling        | Balancing |
| Reaching overhead               | Pulling, pushing      | Shoveling             | Climbing stairs |           |
| Climbing ladders                | Kneeling, squatting   | Lifting – up to 10lbs |                 |           |
| Lifting – up to 20lbs           | Lifting – up to 30lbs | Lifting – up to 40lbs |                 |           |
| Lifting – up to 50lbs & greater | Travel                | On-call               |                 |           |
| Weekends                        |                       |                       |                 |           |
| Other:                          |                       |                       |                 |           |

## SECTION 12: Authorization

**Please digital sign and email to next required signature.**

**Department Head/Chair:**

**Dean (If applicable):**

**Research & Sponsored Programs:  
(If grant funded)**

**Chancellor and President OR  
Divisional Vice President/Provost:  
(Whichever is applicable)**