

State of Connecticut
Objective Job Evaluation (OJE) Questionnaire

Name (Please Print) _____ Date: _____
Class Title _____ Length of Time in Class Title _____
Working Title (if different) _____
Supervisor's Name _____ Supervisor's Class Title _____
Agency _____ Division/Unit _____
Work Location (Address) _____
Work Phone Number _____ Work E-Mail Address _____

INSTRUCTIONS

Use this questionnaire to tell us about specific aspects of your job. The information you provide **will be used in a review of your job class. It will not be used in any way to evaluate your performance in the job.**

Please take the time to answer the questions carefully. The information you provide will assist in ensuring your job is fairly evaluated.

Here are a few suggestions that may help:

- Read the whole questionnaire before beginning to fill it out. Then organize your thoughts. What duty is most important? What duty requires the most skill? Which carries the most responsibility?
- Give clear and detailed facts about your job, using specific examples if you think it will be helpful in understanding your work. Focus on the major functions of your job. Keep in mind that the purpose of the questionnaire is to help the reader understand your job.
- Keep your answers brief. Listing a lot of details does not add to job value.
- Describe your job as it is now, not the way it was or will become. Changes in workloads may not be the result of significant or substantial changes in the scope or depth of a job. They are significant if they indicate different kinds of knowledge, skills, abilities and impact on the organization. If regular work assignments in your job now require additional education, training or certification, it is important that you let us know about those requirements.

Thank you for your assistance.

Revision Date 3/07

INSTRUCTIONS FOR QUESTION NUMBER 1

This question and the following one represent very important parts of the questionnaire and deserve considerable thought and emphasis. One way to complete these two questions is to:

- **On a separate piece of paper, list all of the important duties/responsibilities you can think of that represent the functions you are expected to perform.**
- **Select the responsibility or duty that is the most important to your job. It may be the most important because you spend the majority of your time on it, or its importance may have the greatest impact on your organization.**
- **Next, respond to Question #1 by providing the following information:**
 - a. **What is the most important job duty/responsibility and describe the nature of that duty.**
 - b. **How is the duty/responsibility performed? List the steps you go through to perform the duty/responsibility. Be specific.**
 - c. **What are you attempting to accomplish; that is, what is the end result of the duty/responsibility or why it is done.**
 - d. **Give a percentage estimate of the amount of time it takes (percentage of your work week).**

1. MAJOR FUNCTION OF JOB

Please describe the single most important duty or responsibility required in your job.

a. What is it?

b. Describe how you do it, including principal steps taken.

c. What are you attempting to accomplish in your job?

d. How much of your time does the principal duty or responsibility require? Use percentage of time to describe amount. (Up to 100%)

INSTRUCTIONS FOR QUESTION NUMBER 2

For this question, describe each of the remaining duties/responsibilities on your list in the same manner as you did for Question Number 1.

Indicate percentage of time for each duty or responsibility. The percentage of time cannot exceed 100% of your time INCLUDING PERCENTAGE OF TIME FOR YOUR PRIMARY RESPONSIBILITY.

Use additional paper if necessary.

2. OTHER PRINCIPAL DUTIES/RESPONSIBILITIES

Describe the other important duties or responsibilities required in your job. List them in order of importance. For each, explain what it is, how you do it and what you are attempting to accomplish. Estimate the percentage of time each duty or responsibility takes (**up to a total of 100% including percentage from Question #1/Major Function**).

DUTY/RESPONSIBILITY

% OF TIME

INSTRUCTIONS FOR QUESTION NUMBER 3

“Supervise” means direction for the work of others where you are held directly responsible for work performance, performance evaluations, training, discipline and other personnel matters.

“Lead” means having responsibility for some, but not all, work activities of others. It generally involves making daily work assignments, assisting in the training of co-workers and/or assisting them in problem solving. If you have lead responsibility be sure to describe its extent in the space provided for that purpose.

INSTRUCTIONS FOR QUESTION NUMBER 4

This question applies only if your job has a direct or indirect influence on identifiable dollar amounts. If you do not have direct or indirect influence, leave the question blank.

For example, if you supervise a staff, indicate the annual payroll. If you are responsible for a budget, indicate the annual amount.

Other dollar examples might include such things as annual revenues, annual purchases or annual project or program costs, depending on the nature of your job.

If you are not sure of the exact dollar amounts that relate to your job, give realistic estimates.

3. SUPERVISION

a. Do you supervise or lead other employees? YES _____ NO _____

b. Check the statements that indicate your supervisory responsibilities:

- | | |
|--------------------------------|--|
| _____ Hiring employees | _____ Evaluation of employee performance |
| _____ Termination or discharge | _____ Scheduling or assigning work |
| _____ Training employees | |

c. If you supervise other employees indicate how many in the chart below and describe your responsibilities.

	HOW MANY	CLASS TITLES
<u>Full Supervision</u>		
Full-time Employees	_____	_____
	_____	_____
Part-time Employees	_____	_____
	_____	_____
Describe your supervisory responsibilities		

d. If you lead other employees indicate how many in the chart below and describe your responsibilities.

	HOW MANY	CLASS TITLES
<u>Lead Responsibility</u>		
Full-time Employees	_____	_____
	_____	_____
Part- time Employees	_____	_____
Describe your lead responsibilities		

If you do not supervise a staff, do you supervise a program? YES ___NO___

If yes, explain

4. DOLLAR IMPACT

What dollar amounts do you control or influence?

Annual Amount _____ What is it? _____

Annual Amount _____ What is it? _____

Annual Amount _____ What is it? _____

INSTRUCTIONS FOR QUESTION NUMBER 5

Describe special equipment you are required to operate such as heavy road equipment, office equipment including personal computers and other automated equipment, etc. Be specific.

For example, if you drive a truck or have a job that requires special licensure or certification, include that information. If you use automated equipment, indicate the amount and type of training or minimum skill required to do the job.

INSTRUCTIONS FOR QUESTION NUMBER 6

Personal contacts mean those that are face-to-face or by telephone. Give brief typical examples indicating your primary contacts other than those persons to whom you report or who report to you. It is not necessary to list each and every person you have contact with. The nature of interaction with others is more important than the amount of personal contacts.

5. REQUIRED EQUIPMENT OR SKILLS

Describe any special equipment you are required to operate or special skills you need to apply in performing your job.

Equipment or Skill

How Much of the Time?

6. KEY PERSONAL CONTACTS

Excluding your superior and subordinates, indicate your principal contacts and the purpose of each.

Within State Government

Person or Agency

Nature and Purpose of Contact

Outside State Government

Person or Agency

Nature and Purpose of Contact

INSTRUCTIONS FOR QUESTION NUMBER 7

Every job has one or more “stretch” points in terms of the kinds of mental effort required. This may have to do with the most difficult part of the job to understand or the kinds of analysis or decision-making required by you. Your response should be specific with a description of the situation.

INSTRUCTIONS FOR QUESTION NUMBER 8

Describe the experience, training, capabilities and credentials required to meet your job’s expected level of full performance, not necessarily the amount of experience, etc. you have had.

INSTRUCTIONS FOR QUESTION NUMBER 9

The intention of this question is not to identify special situations such as overcrowded conditions or understaffing. However, if your job by its nature and requirements exposes you to undesirable conditions you should describe them.

a. and b. These parts of the question are to give the reader an understanding of the amount of physical energy you expend on the job, such as lifting and/or working in tiring positions. Include how frequently the physical effort takes place and how much of your time is spent.

c. Physical hazards include such things as potential accidents, illness, chronic health conditions or other physical bodily harm. Typical examples might involve exposure to burns, falls, toxic waste, contaminated materials, vehicular accidents, chronic back ailments, diseases, cuts, etc.

d. Discomfort includes exposure to such things as fumes, extreme heat/cold, dirt, dust, weather conditions, etc.

e. All jobs contain some amount of stress. If your job stands out as having a significant degree of mental or emotional pressure or tension associated with it, this should be described.

9. WORKING CONDITIONS

Describe any adverse conditions that are normal and expected in your job.

a. What type of weight do you lift? How much weight and how much time per day/week do you spend lifting?

Type _____ **How Heavy?** _____ **% Of Time** _____

b. What working positions (sitting, standing, bending, reaching) or types of physical effort (climbing, walking, driving) are required in the normal performance of your work?

Type _____ **Why?** _____ **% Of Time** _____

c. What physical hazards are you exposed to in the normal performance of your work?

Type _____ **Why?** _____ **% Of Time** _____

d. What special physical conditions and discomfort are you exposed to in the normal performance of your work?

Type _____ **Why?** _____ **% Of Time** _____

e. What significant mental stress are you exposed to in the normal performance of your work?

Type _____ **Why?** _____ **% Of Time** _____

INSTRUCTIONS FOR QUESTION NUMBER 10

Carefully review your questionnaire responses to this point. If there is anything that you feel is important in understanding your job that you haven't clearly described, use this space for that purpose.

SPECIFICATION ANALYSIS SHEET

Attached is a copy of your current job specification. Please review it and answer the following questions carefully.

CLASS TITLE: _____

1. Does the Purpose of Class capture the main function of your job? YES NO
If no, how should it be modified?

2. Are the reporting relationships correct? YES NO If no, then explain.

Supervision Received _____
Supervision Exercised _____

3. Do the Examples of Duties cover the major aspects of your job? YES NO

4. Although not every task can be listed, all major tasks (high percentage of the time) or critical (high impact but not necessarily high percentage) should be presented. Are there any Duty Statements which:

Should be added: NO YES If yes, explain

Should be deleted: NO YES If yes, explain

Should be reworded NO YES If yes, explain

5. Are there any other general comments or observations you would like to make concerning your job description?

