

DUTY STATEMENT

Classification:	
Working Title:	
Program:	
Division:	
Section:	
Branch:	
Unit:	
Office Location:	
COI Position: ☐ Yes ☐ No	Telework Eligible: ☐ Yes ☐ No
CBID:	Position Number:
Bilingual Position: ☐ Yes ☐ No	Specify Language:
This position requires the incumbent to perform their essential functions; maintain consistent and regular attendance in-person and/or virtually; to communicate effectively and professionally, both orally and in writing; to develop and maintain knowledge and skills related to specific tasks, methodologies, materials, tools, and equipment; to complete assignments in a timely manner; and to adhere to departmental policies and procedures regarding attendance and conduct including those outlined in the Health Administrative Manual and the DHCS Telework Program. To promote collaboration and connection, essential functions are generally in-person consistent with the DHCS Telework Program and pursuant to an approved Telework Agreement.	
Job Summary:	

Job Summary (cont):

The duties contained in this job description reflect general details as necessary to describe the principal functions of this job. It should not be considered an all-inclusive listing of work requirements. The incumbent of this position may perform other duties (commensurate with this classification) as assigned, including work in other functional areas to cover during absences, to equalize peak work periods or to otherwise balance the workload.

Description of Duties:	
% of Time	Essential Functions

Description of Duties:	
% of Time	Essential Functions

Description of Duties	
% Of Time	Essential Functions
% Of Time	Marginal Functions

Supervision Received: _____ by the (enter supervisor classification):

_____.

Supervision Exercised: (check all that apply)☐ Non-Supervisory Classification / None☐ Clerical Staff☐ Analytical Staff☐ Technical Staff☐ Professional Staff☐ Supervisory Staff☐ Managerial Staff**Special Requirements:**☐ Medical Evaluation /Clearance☐ Typing Certificate☐ Valid Driver's License☐ Background Check / Finger Printing Clearance☐ Valid Professional License (please specify): _____**Desirable Qualifications:****Working Conditions (Check all that apply):**

Prolonged Periods of:

☐ Standing ☐ Sitting ☐ Kneeling ☐ Bending

Travel May be Required:

☐ Occasional ☐ Over Night

Requires Lifting of Heavy Objects up to: _____

Acknowledgements:**Human Resources Acknowledgement:** The Human Resources Division has reviewed and approved this duty statement.

Analyst Name:

Analyst Signature:

Date:

Employee Acknowledgement: I have discussed with my supervisor the duties of the position and have received a copy of this duty statement.

Employee Name:

Employee Signature:

Date:

Supervisor Acknowledgement: I certify this duty statement represents an accurate description of the essential functions of this position. I have discussed the duties of this position with the employee and provided the employee a copy of this duty statement.

Supervisor Name:

Supervisor Signature:

Date:

Instructions

A duty statement is a description of tasks, functions, and responsibilities of a position to which an employee is assigned, and the percent of time spent on each task. It is based on objective information obtained by thoroughly analyzing the position's functions, the competencies and skills required to accomplish these functions, and the organizational needs of the department.

Classification:	Enter the legal title documented in the Classification Specifications which contains a formalized summary of the duties and responsibilities of the positions in a class.
Working Title:	Enter a working title if there is one. The working title differs from a classification title, as it can be specific to the duties the classification is performing. e.g., Personnel Liaison, Contracts Analyst, etc.
Program / Division / Branch / Section / Unit:	Enter the information that is in alignment with where the position is located in the organization. This should also mirror what is presented on the organization chart.
Office Location:	The term office location refers to the state worksite that is the employee's reporting location when not teleworking.
Position Number:	Enter the agency, unit, class code, and serial number of the vacant position being filled. e.g., 808-202-5393-810.
Telework Eligible:	Check 'Yes' if this position is eligible for a telework schedule. Check 'No' if this position is not eligible for a telework schedule.
Conflict-of-Interest (COI) Classification:	Check 'Yes' if this position is designated under the COI Code. The position is responsible for making or participating in the making of governmental decisions that may potentially have a material effect on personal financial interests. The appointee is required to complete Form 700 within 30 days of appointment. Failure to comply with the COI Code requirements may void the appointment. Check 'No' if this position is not designated under the COI Code.
Collective Bargaining Identifier (CBID):	Enter the CBID. The CBID information can be found in the CalHR Pay Scale. Select option 15 for an alphabetical listing of Classifications. Find your classification. The CBID will be located in the last column on the right. For the CBID information, include the appropriate letter (M, S, C, R) and the unit number.
Bilingual Position:	Check 'Yes' if this position is bilingual certified. If 'Yes' is checked the language for which the position is bilingual certified must be specified in the next field. Check 'No' if this position is not bilingual certified.
Job Summary:	Include a brief description of the position, duties performed, reporting structure, and any pertinent information you feel is necessary.
Description of Duties:	Provide an itemized listing of the specific job duties and the percentage of time spent on each separate and distinct task. The essential and marginal functions should be identified. Group related tasks under the same percentage with the highest percentage first. Percentages must be listed in descending order and must equal 100%. Essential Functions: Assess whether the performance of a function is 'essential' by asking yourself why the position exists and what is it the employee is being hired to do. As you review each task, ask yourself whether it is a basic,

	necessary, and integral part of the job, which would make that task essential. Ask yourself, does the position exist solely to perform that function? Are there a limited number of employees available to perform that function? Is it a highly specialized function? If so, the task may be 'essential'. Marginal Functions: Marginal functions are incidental and only account for a minimal part of the job. They are secondary to essential functions, and they make up the remaining duties of the position. Keep in mind that marginal functions can also be absorbed by another staff member so if they were to be removed, it doesn't change the concept of the position.
Supervision Received:	Check the nature of the supervision received and enter the classification of the supervisor. Review the Classification Specifications and see the descriptions below to help determine the type of supervision this position receives. Under Close Supervision: Used for entry-level classes in which an employee is learning the duties of the class as a trainee or apprentice. Under Supervision: The position is subject to continuous and direct control. Under General Supervision: The position is subject to a minimum of continuous and direct control. Under Direction: Indicates that supervision is general and not close, continuous, or concerned with details. The statement tends to be used with technical and professional positions where the employees are expected to operate with a reasonable degree of independence, or as a journey person or fully qualified worker. Under General Direction: This usually refers to classes on the division level that receive administrative direction. The guidance is usually outlined in legislation and general rules of the organization. Under Administrative Direction: This is usually used only in classes involving top-level, administrative positions in which the guidance is largely that of overall policy and the requirements of legislation.
Supervision Exercised:	Check 'Yes' if this position exercises supervision. If 'Yes' is checked, select all classification types supervised by this position. Check 'No' if this position does not exercise supervision.
Special Requirements:	Enter any requirements that may be necessary per classification specification or specific department, i.e., background check, drug test, medical license, etc.
Desirable Qualifications:	Enter any knowledge, skills and abilities and other desirable qualifications, such as special personal characteristics, interpersonal skills, etc., not required as part of the minimum qualifications but represent additional attributes being sought after by the hiring manager.
Working Conditions:	Describes the working conditions of the job, i.e., physical demands, if the job is indoor/outdoor, if travel is required and how often, varying schedule, transportation information, etc.
Human Resources Acknowledgement:	Completed by Human Resources Division to indicate the last date of review.

Employee Acknowledgement:	Employee signs and dates the document certifying that the duties of the position were discussed with the supervisor and that a copy of the duty statement was received.
Supervisor Acknowledgement:	Supervisor signs and dates the document certifying that the duty statement represents an accurate description of the essential functions of the position, and that the duties of the position were discussed with the employee. Once signatures are obtained, make two copies, and place a copy in the supervisor's drop file and provide one to the employee. Send the original to Human Resources Division to file in the employee's Official Personnel File (OPF).