

PPSTA JOB DESCRIPTION ANALYSIS FORM
For Supervisory Positions

General Instructions

Please accomplish this questionnaire accurately and completely. **ALL INFORMATION SHOULD BE ABOUT THE JOB AND NOT THE EMPLOYEE OCCUPYING THE POSITION, AS THE INFORMATION WILL BE USED TO EVALUATE THE JOB AND NOT THE EMPLOYEE’S PERFORMANCE NOR QUALIFICATIONS.** Submit the completed form to your immediate supervisor for his/her review, then to the Head, Administration. Use additional sheet/s as necessary.

Name of Incumbent:	Position Title:
Department/Section:	
Name of Supervisor:	Position Title:

I. MAIN FUNCTION OF THE POSITION (Briefly state the overall purpose of the job)

II. DUTIES AND RESPONSIBILITIES (List all regular and occasional duties performed by the position in order of importance according to functional areas. Describe each as clearly as possible and begin each statement with an action word, e.g. operates, receives, provides, etc. Please attach organizational structure)

Regular Duties (Enumerate the duties and tasks, which the job requires to be done and check the appropriate box to indicate whether it is done on a daily or weekly basis.)

Tasks	Daily	Weekly

Occasional Duties (Enumerate the duties and tasks, which the job requires to be done and check the appropriate box to indicate whether it is done on a monthly, quarterly, semi-annual or annual basis.)

Tasks	Monthly	Quarterly	Semi-Annual	Annual

III. PLANNING REQUIREMENT AND PROBLEM/S ENCOUNTERED (Identify the nature of planning involved and the typical problems encountered (and how they are resolved) in the performance of the job.)

Nature of Planning Required	Nature of Problems Encountered and How these Problems are Resolved

IV. IMPACT ON OPERATIONS (Give specific examples of decisions or actions required by the position. Indicate the nature of decisions or actions (whether shared with peers, recommendatory or full accountability for final results) and what department/s, office/s are affected by them)

Decision/Action	Nature of Decision	Office/Department

V. NATURE OF WORKING RELATIONSHIPS/INTERACTION (List the internal offices/positions and external organizations with which the job has the most frequent interaction. Indicate the nature of the interaction, e.g. giving information, negotiating, giving advice, discussion, etc.

Internal to PPSTA	Nature of Interaction	Occasional (Very seldom; once a month or less)	Periodic (Recurring regularly; weekly or bi-weekly)	Regular (Daily)

External to PPSTA	Nature of Interaction	Occasional (Very seldom; once a month or less)	Periodic (Recurring regularly; weekly or bi-weekly)	Regular (Daily)

VI. SUPERVISION GIVEN (Describe the positions being supervised and the nature of supervision)

Positions Supervised	Nature of Supervision

Supervision Received. (Describe the type of supervision that the position receives)

VII. RESPONSIBILITY OVER PPSTA ASSETS (Indicate the PPSTA’s resources both financial and non-financial which are under the position’s care)

Resources	Estimated Value

VIII. RESPONSIBILITY OVER CONFIDENTIAL INFORMATION, RECORDS AND REPORTS (Check the appropriate item to indicate the amount of control the position exercises over PPSTA information, records and reports prepared, handled and/or maintained by the job)

- ☐ The position is not responsible for any confidential information, records and reports
- ☐ The position is responsible for important and confidential information, records and reports
- ☐ The position is responsible for critical and confidential information, records and reports, be which are sensitive in nature and may be critical to the maintenance of the PPSTA’s market share and competitive advantage

Indicate the confidential records and reports prepared by the job and the frequency by which they are prepared (if applicable)

Records/Reports	Frequency

IX. WORKING CONDITIONS AND PHYSICAL DEMAND (Describe the kind of work environment where the work has to be performed and the physical demands on the job)

X. JOB SPECIFICATIONS (Identify the educational and experiential requirements and competencies required to be able to perform the duties of the job satisfactorily)

A. Education

☐ College graduate

Please specify:

☐ Graduate course

Please specify:

Specify special training or courses required for the job (if applicable)

B. Experience (Check the appropriate item to indicate the minimum number of years of previous experience required for the job)

☐ No previous experience necessary

☐ Less than one year

☐ More than one year (please specify: e.g. at least 4 years)

C. Competencies (Specify the special knowledge, skills and attitude required for the position) Example: Project Management, Strategic Thinking Skills, and Flexible)

Accomplished by: Name of Incumbent (Signature over Printed Name)	Date:
Reviewed and Certified correct by: Name of Supervisor (Signature over Printed Name)	Date: