

HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS

JOB DESCRIPTION

REGULAR <input type="checkbox"/>		SENIOR MANAGEMENT SERVICE <input type="checkbox"/>		OPS/OTHER <input type="checkbox"/>	
POSITION INFORMATION			Position Type Admin <input type="checkbox"/> Director <input type="checkbox"/> Manager <input type="checkbox"/> Supervisor <input type="checkbox"/> Non-Supervisor <input type="checkbox"/>		
Job Title:			Division:		Department:
Job Code:			Pay Grade:		FTE:
Included/Exempt:			Type of Transaction:		
EMPLOYEE:			Special Risk: Yes <input type="checkbox"/> No <input type="checkbox"/>		Overtime: Yes <input type="checkbox"/> No <input type="checkbox"/>
1. This position reports directly to: Job Title _____ Job Code _____ Pay Grade _____ 2. Job Title, Job Code, and Pay Grade of each position which reports directly to this position:					
POSITION DUTIES & RESPONSIBILITIES					
<u>General Description:</u>					
<u>Essential Job Functions:</u>					

Revised:

Knowledge, Skills, and Abilities:

Physical Skills:

MINIMUM QUALIFICATIONS

Education & Experience:

Degree Required: Yes ☐ No ☐ If yes: High School Diploma/GED ☐ Associates ☐ Bachelors ☐ Masters ☐ Doctorate ☐
Experience:

Licenses, Certifications, or Registrations:

Other job related requirements:

Working hours: (A) Daily from to (B) Total hours in workweek 40 hours (C) (split shift, rotation, etc.)

I confirm I have read the above job description, fully understand the requirements of the job, and agree that I have the ability to perform my duties accordingly.

Employee Signature:

Date:

Discussed with Employee: Yes ☐ No ☐

Title:

Date:

Supervisor/Director Signature:

Internal Use Only:

Check those that apply: Uniforms ☐ Drug Screening ☐ Background Check ☐ Background & fingerprint required ☐ Cell Phone ☐
Vehicle ☐ Other:

Approval of Human Resources:

Title: Human Resources Manager

Date:

Revised: