

**MONTGOMERY COUNTY BOARD OF COMMISSIONERS  
POSITION AUDIT QUESTIONNAIRE (Part II-III)  
INSTRUCTIONS**

**TO THE SUPERVISOR:**

As the supervisor of the employee named in the Position Audit Questionnaire, you should recommend or have the authority to hire, suspend, layoff, recall, promote, discharge, assign, reward or discipline. Lead workers are not supervisors for purposes of this questionnaire. If you do not recommend or have this authority, please contact the human resources office so that the person who is the employee's supervisor can be identified to complete this questionnaire.

Answer all questions in **Part II**, Questions #23 through #27, and deliver it to your manager within fourteen days of receipt. **DO NOT** copy information from a county classification specification, as it will not be accepted.

**TO THE MANAGER:**

Complete **Part III**, Questions #28 through #30, within five days of receipt from the supervisor. Please write the employee's name at the top of an updated position description and staple to the top of this questionnaire. (An updated position description is one with the signature date within six months from the date the employee requested the job audit.)

Please forward the completed documents to:

**COUNTY HUMAN RESOURCES DEPARTMENT  
ATTN: DAVE HOLBROOK  
COUNTY ADMINISTRATION BUILDING  
451 W. THIRD STREET, 9<sup>th</sup> FLOOR  
DAYTON, OHIO 45422**



**24. Supervisory Responsibilities:**

Complete the following only if the employee supervises other county employees. Lead work is not considered supervisory for purposes of this questionnaire. List all positions which the employee supervises, and check in the Level of Authority. Group positions for which the employee has the same authority into the same box below. Provide the number of employees directly and indirectly supervised by the employee.

**DEFINITIONS:**

**No Authority:** Do not do the action indicated. **Recommend:** Makes a specific suggestion to your supervisor but the supervisor decides and takes the necessary action. **Prior Approval:** Gets supervisor's approval and then you take action. **Inform Supervisor:** Takes action and then inform your supervisor of what has been done. **Appoint:** Selects an employee for a vacant position. **Promote:** Moves one employee you supervise to another vacant position at a higher range, which you also supervise. **Transfer:** Moves an employee from one position you supervise to another position at the same salary range. **Suspend:** Places an employee in non-pay, non-duty status. **Discharge:** Dismisses an employee for just cause. **Settle Grievance:** Hears and resolve formal complaints.

POSITION(S) TITLE	LEVEL OF AUTHORITY				POSITION(S) TITLE	LEVEL OF AUTHORITY			
	No Authority	Recommend	Prior Approval	Inform Supervisor		No Authority	Recommend	Prior Approval	Inform Supervisor
Appoint					Appoint				
Promote					Promote				
Transfer					Transfer				
Suspend					Suspend				
Discharge					Discharge				
Settle Grievances					Settle Grievances				
Approve Leave					Approve Leave				
Complete Performance Evaluations					Complete Performance Evaluations				
Assist/Check Work					Assist/Check Work				
Set Priorities & Schedules					Set Priorities & Schedules				

**25. List the names or position control numbers of those performing the same or similar duties as this employee.**

\_\_\_\_\_

\_\_\_\_\_

**26. Are any of the employees or positions cited in your response to Question #25 in a classification different than the employee who requested the job audit? Check the appropriate blank. ( ) Yes ( ) No**

If yes, list the classification numbers and titles.

Class Number

Class Title

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

27. I certify that the above statements and responses are accurate and complete to the best of my knowledge.

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_

**PART III. TO BE COMPLETED BY THE MANAGER**

Complete Questions #28 through #30, within five days of receipt from the supervisor.

28. As the management representative, do you agree or disagree with the information furnished by the supervisor? Check the blank that is appropriate.

Agree       Disagree

If you disagree, please outline the points of disagreement below.

Question #	Comments / Correct Response

