



GENERAL INFORMATION			
Employee Name: Click or tap here to enter text.		EMPL ID: ---	
Working Title: Click or tap here to enter text.		FLSA: Choose an item.	
Classification: Click or tap here to enter text.		Job Code/Range: / N/A	
Dept ID:	Department: Click or tap here to enter text.		Time Base: ---
Employee Status:	<input type="checkbox"/> Temporary <input type="checkbox"/> Probationary <input type="checkbox"/> Permanent		Sensitive: <input type="checkbox"/> Yes <input type="checkbox"/> No
Temporary Reassignment:	Effective Date:	End Date:	Effective PD Date:

POSITION SUMMARY

ESSENTIAL JOB FUNCTIONS

% - Other duties as

MINIMUM QUALIFICATIONS

PREFERRED QUALIFICATIONS

REQUIRED/LICENSE/CERTIFICATION

- The person holding this position is considered a 'mandated reporter' under the California Child Abuse and Neglect Reporting Act and is required to comply with the requirements set forth in CSU Executive Order 1083 Revised July 21, 2017 as a condition of employment.

ENVIRONMENT AND/OR PHYSICAL REQUIRMENTS AND/OR SPECIAL WORKING CONDITIONS

SIGNATURES

Supervisor: _____

Date: _____

Name and Title Click or tap here to enter text. _____

Ext: _____

Dean/Director: _____

Date: _____

Name and Title Click or tap here to enter text. _____

Ext: _____

I acknowledge receipt of this position description:

Employee: _____

Date: _____