

Washington Management Service (WMS) Position Description

For assistance completing this form, contact your WMS Coordinator.

Position Information

Position Title:

Position Number/Object Abbreviation:

Incumbent's Name (if filled position):

Agency/Division/Unit:

Address Where Position is Located:

Work Schedule: Full time Part time

Overtime Eligible: Yes No

Supervisor's Name and Title:

Supervisor's Position Number:

Supervisor's Phone Number:

Organizational Structure

Summarize the functions of the position's division/unit and how this position fits into the agency structure (attach an organizational chart):

Describe the position's main purpose, include what the position is required to accomplish and major outcomes produced. Summarize the scope of impact, responsibilities, and how the position supports/contributes to the mission of the organization:

Assigned Work Activities (Duties and Tasks)

Describe the duties and tasks and underline the essential functions. Functions listed in this section are primary duties and are fundamental to why the position exists. For more guidance, see [Essential Functions Guide](#).

Accountability – Scope of Control and Influence

Provide examples of the resources and/or policies that are controlled and influenced:

Describe the scope of accountability:

Describe the potential impact of error or consequence of error (impacts unit, division, agency, state):

Financial Dimensions

Describe the type and annual amount of all monies that the position directly controls. Identify other revenue sources managed by the position and what type of influence/impact it has over those sources.

Operating budget controlled:

Other financial influences/impacts:

Supervisory Responsibilities

Supervisory Position: Yes No

If **yes**, list total full-time equivalents (FTEs) managed and highest position title:

Decision Making and Policy Impact

Explain the position's policy impact (applying, developing or determining how the agency will implement):

Is the position responsible for making significant recommendations due to expertise or knowledge? If yes, provide examples of the types of recommendations made and to whom:

Explain the major decision-making responsibilities this position has full authority to make:

Describe whether decisions are of a tactical or strategic nature and how decisions are made. For example, is there known precedent, is it somewhat unfamiliar, or unknown and unexplored?

What are the risks or consequences of the recommendations or decisions?

Qualifications – Knowledge, Skills, and Abilities

List the education, experience, licenses, certifications, and competencies.

Required Education, Experience, and Competencies:

Preferred/Desired Education, Experience, and Competencies:

Special Requirements/Conditions of Employment

List special requirements or conditions of employment beyond the qualifications above:

Working Conditions

Work Setting, including hazards:

Schedule (i.e., hours and days):

Travel Requirements:

Tools and Equipment:

Customer Relations:

Other:

Acknowledgement of Position Description

The signatures below indicate that the job duties as defined above are an accurate reflection of the work performed by this position.

*Please type your full name in the signature fields. **Do not** use E-sign features or insert signature images.*

Supervisor's Signature (required):

Date:

Appointing Authority's Name and Title:

Signature (required):

Date:

As the incumbent in this position, I have received a copy of this position description.

Employee's Signature:

Date:

For Human Resources to Complete

Standard Occupational Code (SOC):

Position details and related actions taken by Human Resources will be reflected on the Position Evaluation Summary form.