



APPENDIX E

(Part 1 of 4)

Instructions for Completing Employee Work Profile (EWP)

Introduction

The Employee Work Profile is a combination of the employee work description, performance plan, and evaluation assessment. Sections I, II, III, and IV are written or reviewed by the supervisor and the employee at the **beginning of the evaluation cycle** to determine work plans and development needs. Sections V, VI, VII, VIII and IX then are completed by the supervisor and reviewed with the employee at the **end of the cycle**. Agencies may develop their own forms, as long as the required features are included. A combined form, including both the position responsibilities and the performance plan and evaluation may be used, or separate forms may be developed. These forms should be formatted in a way to allow them to be shared under Freedom of Information (FOI) or with other agencies, so SSN and other sensitive personnel info should not be included

Part I – Position Identification Information

1. **Position Number:** Enter assigned position number. (required field)
2. **Agency Name & Agency Code; Division/Department:** Enter agency name and agency code; division or department name as appropriate. (required field)
3. **Location Code and Work Location Code:** Enter the location code for the agency and for the work area. (required field)
4. **Occupational Family & Career Group:** Enter the assigned occupational family and career group. (required field)
5. **Role Title & Code:** Enter the position's Role title and code. (required field)
6. **Pay Band:** Enter the pay band to which this role is assigned. (required field)
7. **Work Title:** Enter the employee's work title if used. (optional field)
8. **SOC Title & Code:** Enter the assigned SOC title and code. (required field)
9. **EEO Code:** Enter the appropriate EEO code. (required field)
10. **Level Indicator:** Check the appropriate box for employee, supervisor, or manager. (required field)
11. **Supervisor's Position Number:** Enter the supervisor's assigned position number. (required field)
12. **Supervisor's Role Title & Code:** Enter the supervisor's role title and code. (required field)
13. **FLSA Status:** Check the appropriate box to designate the position as exempt or non-exempt under the Fair Labor Standards Act. (required field)
14. **Date:** Enter the date the Employee Work Profile is effective (normally the date the position is established or that changes are made to the work assignments). (required field)

Part II – Work Description & Performance Plan (required as part of the Work Description, but agencies may define the components.)

15. **Organizational Objective:** A brief statement describing how the position links to the work unit, division or agency's objective(s). This statement helps the supervisor and employee align the position's work assignments and priorities to agency-desired outcomes and results.
16. **Purpose of Position:** A brief description of the reason the position exists. This statement should link to the organizational objective and capture the most important service or product expected from the employee in the position. This statement gives the reader a good idea of the purpose of the position without going into detail.
17. **KSA's and/or Competencies:** A description of the expertise required to successfully perform the work assigned to the employee. It may be used in hiring new employees or to describe the competency or skill level of the incumbent.
18. **Education, Experience, Licensure, Certification:** Enter the educational background that would be required for entry into position. Also, list any occupational certifications or licenses that the employee must hold.
19. **Core Responsibilities (A – F):** Core responsibilities are defined as primary and essential to the work performed and are written as broad sets of major duties or functions. The core responsibilities must provide sufficient information to assign the position to the proper Role, determine FLSA exemption status, and provide a basis for performance evaluation. List up to five core job responsibilities in order of their importance to the whole job. Statements should be brief and do not have to include every detail of the position's activities. Performance management is preprinted and a required core responsibility for all supervisory employees.

20. **Measures for Core Responsibilities (A – F):** Identify the qualitative and/or quantitative measures against which each responsibility will be assessed.
21. **Special Assignments (G - H):** Special assignments are considered brief in nature and typically are not extended beyond the performance period. Statements should be brief and do not have to include every detail of the assignment.
22. **Measures for Special Assignments (G - H):** Identify the qualitative and/or quantitative measures against which each assignment will be assessed.
23. **Agency and Departmental Objectives (I – L):** Objectives are defined as strategic business objectives to achieve goals set by the agency or division/department. They also may include behavioral competencies that are critical to the employee's success. Identifying objectives and/or competencies on the work plan helps to support organizational values and goals and reinforces each employee's role in meeting those goals.
24. **Measures for Agency/Departmental Objectives (I – L):** Identify the qualitative and/or quantitative measures against which each objective will be assessed.

ADDENDUM – An Organizational Chart must be included with the Work Description/Performance Plan. (required)

Part III – Employee Development Plan (required as part of the performance plan but agencies may define the components)

25. **Personal Learning Goals:** List any learning goals identified by the employee and/or the supervisor.
26. **Learning Steps/Resource Needs:** Indicate specific steps that need to be taken and by whom to accomplish the learning goals. This may include training, coaching, or other learning methods.

Part IV – Review of Work Description/Performance Plan (required)

27. **Employee's Comments, Signature, & Date**
28. **Supervisor's Comments, Signature, & Date**
29. **Reviewer's Comments, Signature, & Date**

Part V – Employee/Position Identification Information (required for Development Plan and Performance Evaluation)

30. **Position Number:** Enter assigned position number. (required)
31. **Agency Name & Agency Code; Division/Department:** Enter agency name and agency code; division and department name as appropriate. (required)
32. **Employee Name:** Enter employee's full name. (required)
33. **Employee ID Number:** Enter unique ID number to identify employee. (required)

Part VI – Performance Evaluation (required but agencies may define the components)

34. **Core Responsibilities - Rating Earned (A – F):** Check the appropriate rating earned by the employee during the performance cycle.
35. **Core Responsibilities - Comments on Results Achieved (A – F):** Describe the employee's performance including documentation to support the earned rating.
36. **Special Assignments - Rating Earned (G - H):** Check the appropriate rating earned by the employee.
37. **Special Assignments - Comments on Results Achieved (G - H):** Describe the employee's performance including documentation to support the earned rating.
38. **Agency Objectives - Rating Earned (I – L):** Check the appropriate rating earned by the employee. (optional)
39. **Agency Objectives - Comments on Results Achieved (I – L):** Describe the employee's performance including documentation to support the earned rating.
40. **Other Significant Results for the Performance Cycle:** Record any significant aspects of the employee's job performance that are not addressed elsewhere in the evaluation. Only include comments that are related to the employee's job performance.

Part VII – Employee Development Results (required but agencies may define the components)

41. **Year-end Learning Accomplishments:** Summarize accomplishments related to the personal learning goals that were set at the beginning of the cycle.

Part VIII – Overall Results Assessment and Rating Earned

42. **Overall Rating Earned:** Check the appropriate overall rating earned by the employee during the performance cycle. (required)

Part IX – Review of Performance Evaluation (required)

43. **Supervisor's Signature & Date**

44. **Reviewer's Comments, Signature, & Date**

45. **Employee's Comments, Signature, & Date**

Optional Sections

Confidentiality Statement – allows an agency to identify confidentiality as a critical organizational value and to establish clear consequences if confidentiality is violated.

Annual Requirements – provides a method to easily gather and track certain agency-specific information on an annual basis.

Physical/Cognitive Requirements – documents essential and marginal job functions for use in accommodating certain medical issues.

APPENDIX E

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EMPLOYEE WORK PROFILE WORK DESCRIPTION/PERFORMANCE PLAN

Parts I, II, III, and IV are written or reviewed by the supervisor and discussed with the employee at the beginning of the evaluation cycle.

PART I – Position Identification Information

1. Position Number:	2. Agency Name & Code; Division/Department:
3. Location Code and Work Location Code:	4. Occupational Family & Career Group:
5. Role Title & Code:	6. Pay Band:
7. Work Title:	8. SOC Title & Code:
9. EEO Code:	10. Level Indicator: <input type="checkbox"/> Employee <input type="checkbox"/> Supervisor <input type="checkbox"/> Manager
11. Supervisor's Position Number:	12. Supervisor's Role Title & Code:
13. FLSA Status: <input type="checkbox"/> Exempt <input type="checkbox"/> Non-Exempt	14. Date:

PART II – Work Description & Performance Plan

15. Organizational Objective:
16. Purpose of Position:
17. KSA's and or Competencies required to successfully perform the work (attach Competency Model, if applicable):
18. Education, Experience, Licensure, Certification required for entry into position:

19. Core Responsibilities	20. Measures for Core Responsibilities
A. Performance Management (for employees who supervise others)	<p><u>Examples of Measures for Performance Management:</u></p> <ul style="list-style-type: none"> • Expectations are clear, well communicated, and relate to the goals and objectives of the department or unit; • Staff receive frequent, constructive feedback, including interim evaluations as appropriate; • Staff have the necessary knowledge, skills, and abilities to accomplish goals; • The requirements of the performance planning and evaluation system are met and evaluations are completed by established deadlines with proper documentation; • Performance issues are addressed and documented as they occur. • Safety issues are reviewed and communicated to assure a safe and healthy workplace.
B.	
C.	
D.	
E.	
F.	
21. Special Assignments	22. Measures for Special Assignments
G.	
H.	

Optional

23. Agency/Departmental Objectives	24. Measures for Agency/Departmental Objectives
I.	
J.	
K.	
L.	

ADDENDUM – ORGANIZATIONAL CHART

This page is printed separate from the remainder of the Work Description/Performance Plan because it contains confidential employee information.

PART III – Employee Development Plan

25. Personal Learning Goals

26. Learning Steps/Resource Needs

Part IV - Review of Work Description/Performance Plan

27. Employee's Comments:

Signature:

Date:

Print Name:

28. Supervisor's Comments:

Signature:

Date:

Print Name:

29. Reviewer's Comments:

Signature:

Date:

Print Name:



EMPLOYEE WORK PROFILE

PERFORMANCE EVALUATION

Parts V, VI, VII, VIII, and IX are written or reviewed by the supervisor and discussed with the employee at the end of the evaluation cycle.

The following pages are printed separate from the remainder of the EWP because they contain confidential employee information.

PART V – Position Identification Information

30. Position Number:	31. Agency Name & Code; Division/Department:
32. Employee Name:	33. Employee ID Number:

PART VI – Performance Evaluation

34. Core Responsibilities - Rating Earned	35. Core Responsibilities - Comments on Results Achieved
A. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
B. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
C. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
D. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
E. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
F. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
36. Special Assignments - Rating Earned	37. Special Assignments - Comments on Results Achieved
G. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
H. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	

38. Agency/Department Objectives - Rating Earned	39. Agency/Department Objectives - Comments on Results Achieved
I. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
J. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
K. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
L. <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	

40. Other significant results for the performance cycle:

Part VII - Employee Development Results

41. Year-end Learning Accomplishments:

Part VIII - Overall Results Assessment and Rating Earned

An employee must receive at least one Performance Management Need Improvement/Substandard Performance form during the performance cycle in order to be eligible for an overall "Below Contributor" rating during the same performance cycle.

An employee who earns an overall rating of "Below Contributor" must be reviewed again within three months.

An employee must receive at least one Acknowledgment of Extraordinary Contribution form during the performance cycle in order to be eligible for an overall "Extraordinary Contributor" rating during the same performance cycle. However, the receipt of an Acknowledgment of Extraordinary Contribution form does not guarantee an overall performance rating of "Extraordinary Contributor" for that performance cycle.

42. Overall Rating Earned

- Extraordinary Contributor
- Contributor
- Below Contributor

Part IX - Review of Performance Evaluation

43. Supervisor's Comments:	Signature: Print Name:	Date:
44. Reviewer's Comments:	Signature: Print Name:	Date:
45. Employee's Comments:	Signature: Print Name:	Date:



APPENDIX E

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EMPLOYEE WORK PROFILE – AGENCY OPTIONAL SECTIONS

Confidentiality Statement:

I acknowledge and understand that I may have access to confidential information regarding [employees, students, patients, inmates, the public]. In addition, I acknowledge and understand that I may have access to proprietary or other confidential information business information belonging to [Agency]. Therefore, except as required by law, I agree that I will not:

- Access data that is unrelated to my job duties at [Agency];
- Disclose to any other person, or allow any other person access to, any information related to [Agency] that is proprietary or confidential and/or pertains to [employees, students, patients, inmates, the public]. Disclosure of information includes, but is not limited to, verbal discussions, FAX transmissions, electronic mail messages, voice mail communication, written documentation, "loaning" computer access codes, and/or another transmission or sharing of data.

I understand that [Agency] and its [employees, students, patients, inmates, public], staff or others may suffer irreparable harm by disclosure of proprietary or confidential information and that [Agency] may seek legal remedies available to it should such disclosure occur. Further, I understand that violations of this agreement may result in disciplinary action, up to and including, my termination of employment.

Employee Signature

Date

Annual Requirements:

Activity

Current? If so, date completed?

Required In-Service or other training	<input type="checkbox"/> Yes _____ Date	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Valid Licensure/Certification/Registration	<input type="checkbox"/> Yes _____ Date	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Employee Health Update	<input type="checkbox"/> Yes _____ Date	<input type="checkbox"/> No	<input type="checkbox"/> N/A

Physical/Cognitive Requirements (Indicate by each E = Essential, M = marginal, or N/A)

Physical Demands and Activities:

<input type="checkbox"/> Light lifting <20 lbs.	<input type="checkbox"/> Standing _____	<input type="checkbox"/> Sitting _____	<input type="checkbox"/> Bending _____
<input type="checkbox"/> Moderate lifting 20-50 lbs.	<input type="checkbox"/> Lifting _____	<input type="checkbox"/> Walking _____	<input type="checkbox"/> Climbing _____
<input type="checkbox"/> Heavy lifting >50 lbs.	<input type="checkbox"/> Reaching _____	<input type="checkbox"/> Repetitive motion _____	
<input type="checkbox"/> Pushing/pulling	<input type="checkbox"/> Other _____		

Emotional Demands:

<input type="checkbox"/> Fast pace _____ Avg. pace _____
<input type="checkbox"/> Multiple priorities
<input type="checkbox"/> Intense customer interaction
<input type="checkbox"/> Multiple stimuli
<input type="checkbox"/> Frequent change

Mental/Sensory Demands:

<input type="checkbox"/> Memory _____	<input type="checkbox"/> Reasoning _____	<input type="checkbox"/> Hearing _____
<input type="checkbox"/> Reading _____	<input type="checkbox"/> Analyzing _____	<input type="checkbox"/> Logic _____
	<input type="checkbox"/> Verbal communication _____	
	<input type="checkbox"/> Written communication _____	
<input type="checkbox"/> Other _____		

APPENDIX E

(Part 4 of 4)



Guide for Designing an Employee Work Profile (EWP)

It is recommended that agencies use a combination form similar to the sample Employee Work Profile. This combines elements of the current Position Description form (PD) and Performance Planning and Evaluation form. Agencies may, however, have separate forms as long as the required features are included.

The EWP should be designed to have a page-break just before Part III - Review of Work Description/Performance Plan. This allows Parts I and II (Position Identification Information and Work Description & Performance Plan) to be easily copied and shared with other agencies and DHRM, without sharing personal development planning or performance evaluation information. This page-break might also facilitate agency file organization.

It is recognized that some agencies may want to adopt other formats and may want to keep the PD and Performance Management forms totally separate. Whatever format is used, the following elements are required:

All elements (except #7) in Part I - Position Identification Information

1. Position Number
2. Agency Code & Name; Division/Department Name
3. Location Code and Work Location Code
4. Occupational Family & Career Group
5. Role Title & Code
6. Pay Band
7. Work Title (optional)
8. SOC Title and Code
9. EEO Code
10. Level Indicator
11. Supervisor's Position Number
12. Supervisor's Role Title & Code
13. FLSA Status
14. Date

Part II - A **Work Description & Performance Plan** is required, however the structure and elements as listed in the prototype are not required. Information in this section must be sufficient to assign the position to the proper Role, determine FLSA status, and provide a basis for performance evaluation.

Addendum - An **Organizational Chart** is required.

Part III - An **Employee Development Plan** is required, however the structure and elements as listed in the prototype are not required. The development plan relates specifically to an employee, and as such is considered a confidential personnel document.

Part IV - Signatures designating **Review of Work Description & Performance Plan** are required of Employee, Supervisor, and Reviewer. The signature section should be on a separate page so to facilitate filing and protection of employee privacy should the position description be shared.

Part V - **Employee/Position Identification Information** - The following information is required as part of the Performance Evaluation sections.

1. Position Number
2. Agency Name & Code; Division/Department
3. Employee Name
4. Employee ID Number

Part VI - A **Performance Evaluation** is required, however the structure and elements as listed in the prototype are not required. This is a confidential section.

Part VII - A section addressing **Employee Development Results** is required, however the structure and elements as listed in the prototype is not required. This is a confidential section.

Part VIII - **Overall Results Assessment and Rating Earned** - is required as listed in the prototype. This is a confidential section.

Part IX - Signatures designating **Review of Performance Evaluation** are required of Employee, Supervisor, and Reviewer. This is a confidential section.

Performance Management – Performance Management Need Improvement/Substandard Performance Form - All of the elements listed are required, however the format can differ by agency. This is a confidential form.

Performance Management – Acknowledgment of Extraordinary Contribution Form - All of the elements listed are required, however the format can differ by agency. This is a confidential section.