UNIVERSITY OF MASSACHUSETTS
POSITION DESCRIPTION

<table>
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<tr>
<th>NAME:</th>
<th>DEPARTMENT:</th>
<th>DATE:</th>
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<tr>
<th>STATE TITLE:</th>
<th>WORKING TITLE:</th>
<th>POSITION LEVEL:</th>
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A. GENERAL SUMMARY OF POSITION:

B. EXAMPLES OF DUTIES: (Identify those duties that demand the greatest amount of time, attention, and are of key priority to the department. Include any duties which present unusual physical requirements such as standing, walking, exposure to chemicals, etc.)

C. MINIMUM QUALIFICATIONS: (Minimum required level of education; required licenses; years and nature of related experience; unique requirements related to physical ability, travel, working evenings and weekends, etc.)
D. SUPERVISION RECEIVED:

E. SUPERVISION EXERCISED:
   1. Number of non-student employees directly supervised:
   2. Number of non-student employees indirectly supervised:
   3. Average number of student employees supervised at any given time:

________________________________________

OFFICIAL POSITION CERTIFICATION

This is a complete and accurate description of this position.

DATE ___________________________  SIGNATURE - STAFF MEMBER

DATE ___________________________  SIGNATURE - DEPARTMENT HEAD

DATE ___________________________  SIGNATURE - HUMAN RESOURCES DIVISION