

Position Description

Read each heading carefully before proceeding. Make statements simple, brief, and complete. Be certain the form is signed. Send the original to the Division of Personnel Services.

CHECK ONE: NEW POSITION EXISTING POSITION

Part 1 - Items 1 through 12 to be completed by department head or personnel office.

1. Agency Name Kansas Department of Agriculture		9. Position No. K0221710	10. Budget Program Number		Agency Number		
2. Employee Name (leave blank if position vacant)			11. Present Class Title (if existing position) Senior Administrative Assistant				
3. Division Animal Health			12. Proposed Class Title				
4. Section	For Use By Personnel Office	13. Allocation				Position Number	
5. Unit		14. Effective Date					
6. Location (address where employee works) City Topeka County SN		15. By	Approved				
7. (circle appropriate time) Full time X Perm. X Inter. Part time Temp. %		16. Audit Date: By: Date: By:					
8. Regular hours of work: (circle appropriate time) FROM: 8:00 AM/PM To: 5:00 AM/PM		17. Audit Date: By: Date: By:					

PART II - To be completed by department head, personnel office or supervisor of the position.

18. If this is a request to relocate a position, briefly describe the reorganization, reassignment of work, new function added by law or other factors which changed the duties and responsibilities of the position.

19. Who is the supervisor of this position? (Who assigns work, gives directions, answers questions and is directly in charge.)

Name	Title	Position Number
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Who evaluates the work of an incumbent in this position?

Name	Title	Position Number
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20. a) How much latitude is allowed employee in completing the work? b) What kinds of instructions, methods and guidelines are given to the employee in this position to help do the work? c) State how and in what detail assignments are made.

This employee works independently. Questions by phone or in person are answered effectively or routed to the correct personnel. Employee must be able to understand and follow through with instructions, methods and guidelines. Employee must be familiar with office procedures and be confident in relaying messages or instructions to office staff or the public.

21. Describe the work of this position using the page or one additional page only. (Use the following format for describing job duties:)

What is the action being done (use an action verb); to **whom** or **what** is the action directed (object of action) ; **why** is the action being done (be brief); **how** is the action being done (be brief). For each task state: Who reviews it? How often? What is it reviewed for?

Number Each Task and Indicate Percent of Time	
25%	Responds to regulatory and procedural inquiries from owners, veterinarians and others concerning livestock entering Kansas. Provides guidance on regulatory requirements to be met. Issues permits as needed.
20%	Records and files equine infectious anemia (EIA) laboratory test reports and issues quarantines on EIA positive horses after notifying the Livestock Commissioner so that field staff can be notified for follow-up and appropriate action. Issues Equine Passports and maintains the records of them.
15%	Receives and fills orders for inventory supplies from licensed and accredited veterinarians (approximately 1100). Maintains accurate records of health certificate books issued by number.
10%	Issues all grazing and commuter permits for cattle. Also issues letters of authority, signed by the Commissioner, to biological companies desiring to market specific drugs in Kansas. Maintains accurate files of approved biologics. Records and files invoices for calfhood vaccination tags and brucellosis reactor tags to record to whom the tags were issued.
10%	Processes payments for large and small animal health certificates and other supplies issued, recording the appropriate veterinarian information and mailing appropriate material to them.
15%	Acts as receptionist for the agency, answering questions or forwarding calls to appropriate staff. Opens, posts and distributes all daily mail. Performs other related tasks upon request. Maintains an accurate and up-to-date desk reference manual for this position. Processes outgoing mail for field staff weekly.
5%	

22. a. If work involves leadership, supervisory, or management responsibilities, check the statement which best describes the position.

- () Lead worker assigns, trains, schedules, oversees, or reviews work of others.
- () Plans, staffs, evaluates, and directs work of employees of a work unit.
- () Delegates authority to carry out work of a unit to subordinate supervisors or managers.

b. List the names, class titles, and position numbers of all persons who are supervised directly by employee on this position.

Title

Position Number

23. Which statement best describes the results of error in action or decision of this employee?

- Minimal property damage, minor injury, minor disruption of the flow of work.
- Moderate loss of time, injury, damage or adverse impact on healthy and welfare of others.
- Major program failure, major property loss, or serious injury or incapacitation.
- Loss of life, disruption of operations of a major agency.

Please give examples.

Phone calls not answered promptly and correctly and forwarded to the proper staff or correct messages taken could result in program error and delays as well as poor representation of the agency to the public. If mail is not distributed properly and in a timely manner this could also result in program errors and delays.

24. For what purpose, with whom and how frequently are contacts made with the public, other employees or officials?

Contacts are made through the telephone as well as greeting clients in person. Employee deals with all staff, federal employees and the public on a daily basis.

25. What hazards, risks or discomforts exist on the job or in the work environment?

The risks or discomforts are those typical of a high volume and structured work place.

26. List machines or equipment used regularly in the work of this position. Indicate the frequency with which they are used.

Multi-line telephone, computer and copier are used daily.

PART III - To be completed by the department head or personnel office

27. List in the spaces below the minimum amounts of education and experience which you believe to be necessary for an employee to begin employment in this position.

Education - General

Education or Training - Special or professional

License, certificates and registrations

Special knowledge, skills and abilities

Experience - Length in years and kind

Routine work experience in office/clerical work.

28. SPECIAL QUALIFICATIONS

State any additional qualifications for this position that are necessary either as a physical requirement of an incumbent on the job, a necessary special requirement, a bona fide occupational qualification (BFOQ) or other requirement that does not contradict the education and experience statement on the class specification. A special requirement must be listed here in order to obtain selective certification.

Signature of Employee

Date

Signature of Personnel Official

Date

Approved:

Signature of Supervisor

Date

Signature of Agency Head or
Appointing Authority

Date