



State of Oklahoma
Human Capital Management
A Division of the Office of Management and Enterprise Services

SUPPLEMENTAL POSITION DESCRIPTION QUESTIONNAIRE (HCM-39A)

This Supplemental Position Description Questionnaire is intended to show significant changes in the duties and responsibilities assigned since the position was last audited or reviewed for determination of the level of assignment. The information provided will be used by the agency to determine if another level of the job family is more appropriate to describe the duties and responsibilities assigned.

NOTE: If an audit is required by Human Capital Management to determine the appropriate Job Family for a position, a Position Description Questionnaire or a Classification Dispute Form must be submitted.

Part 1 - GENERAL INFORMATION:

Name and Employee ID Number of Employee Occupying the Position or indicate if Vacant	Current Official HCM Job Title and Job Family Code Assigned to the Position	
Agency	Current Date	PIN:
Division and Section Where Position Is Assigned	Work Address (include zip + 4) and Telephone Number	
Name and Work Telephone or Appointing Authority or Designee Completing the Form	Job Title of Appointing Authority or Designee Completing this Form	

Part 2 - CHANGES IN DUTIES AND RESPONSIBILITIES:

B. Briefly describe the primary duties and major responsibilities of the position which are significantly different from those described when the position was last audited or reviewed.