



**CAYUGA
COUNTY**
(315) 253-1284

CIVIL SERVICE COMMISSION
COUNTY OFFICE BUILDING - 2ND FLOOR
160 GENESEE STREET, AUBURN NY 13021-3489

CIVIL SERVICE LAW: SECTION 22: CERTIFICATION FOR POSITIONS:
Before any new position in the service of a civil division shall be created or any existing position in such service shall be reclassified, the proposal therefor, including a statement of the duties of the position, shall be referred to the municipal commission having jurisdiction and such commission shall furnish a certificate stating the appropriate civil service title for the proposed position or the position to be reclassified. Any such new position shall be created or any such existing position reclassified only with the title approved and certified by the commission.

Amended June 1, 1978.

"NEW POSITION DUTIES STATEMENT"

DIRECTIONS: Dept. Head or other Authority requesting the creation of a NEW position, prepare a SEPARATE "NPDS" DESCRIPTION for EACH NEW position to be created EXCEPT that 1 "NPDS" DESCRIPTION may cover 2 or more IDENTICAL positions in the SAME organizational unit. (FORWARD 1 COPY TO THE COMMISSION OFFICE).

1. COUNTY DEPT./ SCHOOL DISTRICT / TOWN / VILLAGE		BUREAU, DIVISION, UNIT OR SECTION
LOCATION OF POSITION	# OF POSITIONS REQUESTED	REGULAR BUDGETED OR GRANT FUNDED POSITION
HOURS PER WEEK	FULL-TIME OR PART-TIME POSITION	ANNUAL OR HOURLY SALARY
LICENSES OR CERTIFICATES REQUIRED	SUGGESTED JOB TITLE	COMMENTS

2. DESCRIPTION OF DUTIES: Describe the work in sufficient **DETAIL** to give a **CLEAR WORD PICTURE** of the job. Use a separate paragraph for each kind of work and describe the more important or time-consuming duties **FIRST**. In the left column, estimate how the total working time is divided (100%).

<u>% OF WORK TIME</u>	<u>DESCRIPTION</u> (NOTE: In order to tab to this column, use CONTROL + TAB keys)

(IF MORE SPACE IS NEEDED ATTACH ADDITIONAL SHEETS)

3. Names and titles of persons supervising this position (General, Direct, Administrative, etc.):

NAME	TITLE	TYPE OF SUPERVISION

4. Names and titles of persons supervised by employee in this position:

NAME	TITLE	TYPE OF SUPERVISION

5. Names and titles of persons doing substantially the same kind and level of work as will be done by the incumbent of this new position:

NAME	TITLE	LOCATION OF POSITION

6. What minimum qualifications do you think should be required for this position?

Education: High School years
 College years, with specialization in
 Other years, with specialization in

Experience: (list amount and type)

Essential knowledge, skills and abilities:

Type of license or certificate required:

7. The above statements are accurate and complete.

Date: _____ Title: _____ Signature: _____

CERTIFICATE OF CAYUGA COUNTY CIVIL SERVICE COMMISSION

8. In accordance with the provisions of Civil Service Law, Section 22, the CAYUGA COUNTY CIVIL SERVICE COMMISSION certifies that the appropriate civil service title for the position described is:

CLASSIFIED CSM: COMMENTS:

DATE: _____ SIGNATURE: FAYE R. HATFIELD, EXECUTIVE SECRETARY

ACTION BY LEGISLATIVE BODY OR OTHER APPROVING AUTHORITY

9. Creation of described position:

- Approved
- Disapproved

Date: _____ Signature: _____