



## ANALYSIS OF ESSENTIAL FUNCTIONS

1. EMPLOYEE NAME	2. EMPLOYEE'S OFFICIAL TITLE	3. SERIES/GRADE	4. TODAY'S DATE
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**FACTORS TO CONSIDER IN DETERMINING WHETHER A JOB FUNCTION IS ESSENTIAL**

1. THE EMPLOYER'S JUDGMENT AS TO WHICH FUNCTIONS ARE ESSENTIAL (*i.e. whether the reason the position exists is to perform that functions*);
2. WRITTEN JOB DESCRIPTIONS PREPARED BEFORE ADVERTISING OR INTERVIEWING APPLICANTS FOR THE JOB;
3. THE AMOUNT OF TIME ACTUALLY SPENT ON THE JOB PERFORMING THE FUNCTION (*i.e., the currently assigned duties the employee is actually performing*);
4. THE CONSEQUENCES OF NOT REQUIRING THE INCUMBENT TO PERFORM THE FUNCTION;
5. THE TERMS OF ANY COLLECTIVE BARGAINING AGREEMENT;
6. THE WORK EXPERIENCE OF PAST INCUMBENTS IN THE JOB;
7. THE CURRENT WORK EXPERIENCE OF INCUMBENTS IN SIMILIAR JOBS; AND/OR
8. THE NUMBER OF OTHER EMPLOYEES AVAILABLE TO PERFORM THE FUNCTION OR AMONG WHOM THE PERFORMANCE OF THE FUNCTION CAN BE DISTRIBUTED.

ESSENTIAL FUNCTION ( <i>briefly describe</i> )	PERCENTAGE OF TIME ( <i>approx. time completing the essential functions during the work week</i> )	CAN BE PERFORMED REMOTELY ( <i>Yes/No</i> )	DOES IT REQUIRE PHYSICAL LABOR? ( <i>Yes/No</i> )	PHYSICAL REQUIREMENTS
<b>Sample: Installation of network drives</b>	5%	No	Yes	Walking, Standing, Lifting, Carrying
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<b>MAXIMUM</b> Telerwork hours available in current position <i>(calculated by: adding up the percentage of time annotated above as "Yes" in "Can be performed remotely" column)</i>	<b>COMBINED PERCENTAGE</b>  <i>Sample</i> 20%  %	<b>HOURS PER WEEK</b>  8 of 40  of	<b>HOURS PER PAY PERIOD</b>  16 of 80  of	

5. DMO NAME	6. DMO TELEPHONE NUMBER ( <i>Include area code</i> )	7. DMO EMAIL ADDRESS
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8. DMO SIGNATURE

**\*\*\* When sending this form via electronic means, please ensure the file is encrypted to protect the requestors PII & PHI information.**

This form should be retained separately from the employee's Official (paper or electronic) Personnel File.