

**APPEAL OF POSITION CLASSIFICATION FOR EMPLOYEES COVERED
BY UWOSA COLLECTIVE AGREEMENT
(Reference Collective Agreement Article 44)
Attention: Job Evaluation Appeals Committee**

(A) Contact Information:

Name of person requesting appeal: _____ Kendrick N. Allen
Title: _____ Technical Support
Phone: _____ 662-2111 ext. 81537
Email: _____ kallen6@uwo.ca
Department: _____ Campus Computer Store, Western Retail Services

(B) Position Information:

Current Incumbent: _____ Kendrick N. Allen
Current Classification: _____ n/a
Classification Being Appealed: _____ Technical Level 4
Date Evaluation Results Letter Received: _____ September 17, 2007

(C) Information Required For Job Evaluation Appeals Committee

Reason for the appeal:

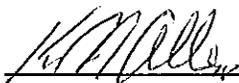
The educational qualifications, responsibilities and duties of this position are at least equal to, if not exceeding, those of my previous Technical Level 5 position at the Faculty of Engineering.

The position in question includes duties which were not part of my previous Tech Level 5 job, i.e. customer service and customer interaction, buyer/vendor interaction, and inventory maintenance

Supporting Information (Optional):

(Attach an additional page if more space is required)

(D) Approvals:

Signature of Person Appealing:  Date: September 24/07

The appellant shall send one copy of the material to Human Resources and one copy to JEAC c/o UWOSA.

UWOSA JOB EVALUATION RECORDING FORM
TECHNICAL EVALUATION PLAN
 (APPEAL)

Dept: Book Store
Dept. Num.:
Incumbent: Kendrick Allen
Cittee Mem.Present: UWOSA: L. Johnson, M. Parker,
 ADMIN: C. Bumbacco, C. Zrini

Job Title: Technical
Eval. Date: October 17, 2007

| | FACTOR | COMMENTS | SUB FACT | DEGREE | PTS | Profile | | |
|-----|-----------------------|--|----------|--------|-----|---------|---|---|
| | | | | | | - | = | + |
| I | Job Knowledge | College diploma (3 years) plus specialization | Educ | 6 | | | | |
| | | | Exper. | | 5 | 180 | | |
| II | Initiative | Independence | | 3 | 53 | | | |
| | | | | 4 | 60 | | | |
| III | Complexity/Judgement | Variety. Judgement to fix problems | | 3 | 83 | X | | |
| | | | | 4 | 60 | | | |
| IV | Impact on Results | Awkward (weak) | | 3 | 15 | | | |
| | | | | 4 | 60 | | | |
| V | Supervision of Others | Incidental | Scope | 1 | | | | |
| | | | Char. | | A | 15 | | |
| VI | Effort/Demands | Physical exertion. Close attention to detail. Critical deadlines | | 3 | 28 | | | |
| | | | | 4 | 60 | | | |
| VII | Contacts | Interpretive - public, vendors, students | | 3 | 28 | | | |
| | | | | 4 | 60 | | | |
| | | | | 3 | 30 | | | |

CLASSIFICATION ASSIGNED

Total Pts: **449**

Group: _____ Technical _____

Level: _____ 6 _____ EVAL. DATE: _____ Oct-07 _____

Co-Chair Signatures: UWOSA: Mike Parker _____

ADMIN: Connie Zrini _____

**POSITION DESCRIPTION
QUESTIONNAIRE**

**THE UNIVERSITY OF WESTERN ONTARIO
EMPLOYEE RELATIONS**

U.W.O. ID NUMBER _____ PRESENT INCUMBENT SURNAME _____ INITIALS _____ POSITION IDENTIFICATION DEPT. NO _____ P.S. JOB CODE _____

BASIC POSITION INFORMATION

DEPT. NAME _____

SECTION NAME _____

LOCATION _____

WORK WEEK HRS. _____

SUPERVISOR SURNAME _____

| | |
|--------------------|-----------------------|
| FOR SALARY CLASS'N | ADMINISTRATION USE |
| CLASS'D | EFFECT |
| ANALYST | Date _____ Date _____ |

INITIAL _____ PHONE _____

1) PLEASE LIST AND DESCRIBE YOUR MAJOR DUTIES WITH AN APPROXIMATE ANNUAL PERCENTAGE OF TIME SPENT ON EACH. USE SPECIFIC TERMINOLOGY PERTINENT TO THIS POSITION; PROVIDE EXAMPLES (E.G. TESTS, PROCEDURES, ETC.) AND CLARIFY YOUR INVOLVEMENT IN EACH DUTY (RE. SUPERVISE IT, DO IT, PARTICIPATE IN IT, ETC.)

| NO. | MAJOR DUTIES | %90 |
|-----|--------------|-----|
|-----|--------------|-----|

Provide technical support to Students, Staff and Faculty:

1. Duties include (customer support, trouble shooting customers systems, configuring, installing and set-up of desktops as well as laptops.
2. Install and support system software;(i.e. Ms office, Virus Protection...)
3. Install and Diagnose various platforms: (Windows:2000, Xp, Vista and Mac OSX.)
4. Install and Diagnose various Hardware related issues: (Hard drive, Memory, Video Card, System Back-up, Mother-board, Power supply...)

| NO. | OTHER DUTIES (less than 10%) |
|-----|------------------------------|
|-----|------------------------------|

- Work with CCS Buyer and Vendors to ensure that we are current on all aspects of training that pertains to service of all equipment sold at CCS.
- Maintain controls of tech area inventory, customer product and warranty claims. -Liaise with ITS and WRS Tech Team with regards to: (RAMP, WRS Internal Systems) -Support all in house applications.

2) PLEASE COMPLETE THE FOLLOWING TABLE CONCERNING STAFF MEMBERS WHO REPORT DIRECTLY AND FORMALLY TO YOU.

| Classification/Rank (e.g. Clerk I) | RF/RP Pos'n No. | For CW or TM Staff-employed | | Responsible for (e.g. Filing records...) |
|---------------------------------------|--------------------|--------------------------------|---------------|--|
| | | From (month) | To (month) | |
| | | | | |

3) PLEASE CHECK THE SUPERVISORY DUTIES WHICH YOU PERFORM REGULARLY.

Training and guidance for new employees
 Work distribution and/or verification of results
 Performance review and salary recommendations
 Hiring and firing; please describe the degree of your involvement:

4. IF YOU **COMPOSE** (originate) WRITTEN MATERIAL, PLEASE COMPLETE THE FOLLOWING TABLE:

| Type of Composition | Method of Composition | Brief Description of Content |
|--|---|-------------------------------|
| Correspondence: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ | <input type="checkbox"/> Complete Composition | |
| | <input type="checkbox"/> Partial composition with general direction (verbal or written) | |
| | <input type="checkbox"/> Prescribed format | |
| Reports: | <input type="checkbox"/> Complete composition | -Diagnostic/Support Documents |
| | <input checked="" type="checkbox"/> Partial composition ... | -Customer Documents |
| | <input checked="" type="checkbox"/> Prescribed format | -Technical Documents |
| Other: | <input type="checkbox"/> Complete composition | |
| | <input type="checkbox"/> Partial composition... | |
| | <input type="checkbox"/> Prescribed format | |

5) WHAT ARE THE **MINIMUM** SKILLS, EDUCATION, SPECIAL TRAINING AND/OR EXPERIENCE REQUIRED TO PERFORM SUCCESSFULLY THE DUTIES OF THIS POSITION?

- College Diploma in Computer Science or a Degree in a related field.
- Min 2-3 yrs. experience with computer support in both Hardware and Software Theory.
- Experience using Windows Platform, Networking (Network +), Various Software Suites(i.e. Office, Corel, Adobe, Photoshop...)Linux operating system, Mac OSX + any Mac related software. A+ certification would be an asset.
- Strong communication skills both verbal and written, organizational and interpersonal skill set with a strong emphasis on excellent customer service skills.
- Ability to lift and move up to 50.lbs
- Periodic evenings and weekends during peak times or as needed.

6) PLEASE DESCRIBE THE **NATURE** AND **FREQUENCY** OF THE SUPERVISION YOU RECEIVE.

- Minimal supervision (meet once a week)
- Progress reports via e-mail, verbally or written.
- Daily customer concerns are handled with minimal supervision.
- Supervisor is informed of more problematic issues and solutions create an expense must be consulted with a supervisor first.

7) WHAT TYPES OF PROBLEMS OR INQUIRIES ARE YOU EXPECTED TO DEAL WITH ON YOUR OWN?

- Daily diagnostic and technical customer issues.
- Liaise with WRS Tech Team on any internal reconfiguration or application issues or concerns.
- May be consulted by a supervisor for solutions to a particular issue or concern.

~8) WHAT TYPES OF PROBLEMS OR INQUIRIES MUST BE REFERRED TO ANOTHER SOURCE FOR SOLUTION?

- Non warranty issues that require further service and possibly third party solutions -
- Isolated technical issues requiring ITS or WRS Tech Team involvement.

9) WHAT ACTIVITIES DO YOU PLAN OR ORGANIZE? PLEASE INDICATE THE LENGTH OF TIME INVOLVED (e.g. daily planning of assigned work, monthly ...)

10) PLEASE COMPLETE THE FOLLOWING TABLE CONCERNING YOUR MOST IMPORTANT CONTACTS (in person, by telephone, or in writing). PLEASE EXCLUDE CONTACTS WITH YOUR SUPERVISOR AND YOUR SUBORDINATES. INCLUDE GROUPS AS WELL AS INDIVIDUALS.

| CONTACT'S TITLE (e.g. Purchasing Agents) | LOCATION (inside outside) dept dept | FREQUENCY (dly wkly mthly) | PURPOSE OF THE COMMUNICATION (e.g. to provide information <u>concerning...</u>) |
|---|--|-------------------------------|--|
| ITS | | | Seek assistance regarding Western Supported Software, Networking and RAMP concerns. |
| Campus Computer Store | | | Servicing Warranties, Virus installs, And Installation of new Hardware Products. |
| Cell/ISP (i.e.Rogers.Bell.Virgin) | | | Activations, Service and Warranty. |

THIS COMPLETED QUESTIONNAIRE IS AN ACCURATE DESCRIPTION OF THE WORK BEING PERFORMED.

POSITION DESCRIPTION QUESTIONNAIRE

THE UNIVERSITY OF WESTERN ONTARIO EMPLOYEE RELATIONS DEPARTMENT

A. PURPOSE

University Personnel Policy requires the maintenance of up-to-date job information on all staff positions for use in job evaluation and other programs (e.g. staffing, orientation, etc.) This form is designed to encourage direct participation by the staff member in providing information about the position. Your co-operation in completing the attached questionnaire is appreciated.

B. USE

This Questionnaire **must be used** to describe all staff positions covered under the U.W.O. Staff Association. Should you require assistance in completing this form, contact Salary Administration at extension 82198.

C. INSTRUCTIONS

1. The information must be authorized (signed & dated) by both the staff member, the immediate supervisor, and the Dean or Director before it is forwarded to the Salary Administration in Employee Relations Department.
2. The following table may be helpful in determining annual time percentages:

| | | |
|----------------|--------------------|-------------------|
| 1hr/day(14%) | 1 day/week (20%) | 1 day/year (0.4%) |
| 1 hr/week (3%) | 1 day/month (4.5%) | 1 week/year (2%) |
3. If necessary, please attach an extra page for additional information which you feel is required to provide a complete understanding of your position.

D. NOTES

1. A change in duties and/or responsibilities does not automatically imply a change in classification and salary.
2. A job description is not intended to measure an increase in the volume of work; rather it should only reflect the areas of responsibilities and the nature of duties.

Please complete below and forward with the Questionnaire.

| <u>Reason(s) for requested review</u> | <u>Routing approvals: I agree that this review is required</u> |
|---------------------------------------|--|
| Classify new position _____ | Immediate supervisor |
| Change in responsibilities _____ | Department Head |
| Check current classification _____ | Dean's Office |
| Update your records _____ | Date |