



**MILWAUKEE COUNTY
JOB EVALUATION QUESTIONNAIRE**

This form is designed to assist you in describing your departmental job. You are asked to fill this form out to outline the essential duties and responsibilities; and identify the knowledge, skills and abilities required to successfully perform the job. This form is used to request new job classifications, review current classifications, reclassification, reallocations, and general updates to the job description. **Note:** It is the job that is being evaluated, not the position/incumbent. Thank you for your cooperation.

GENERAL INSTRUCTIONS:

1. Before beginning, please look over the entire questionnaire. Each question should be answered completely and accurately. If a question does not apply to this job, please indicate "N/A" (Not Applicable).
2. To complete the questionnaire, please type and/or select your responses.
3. If you wish to make additional comments, please use the space available in the "Additional Comments" section on page 6 of this questionnaire.

A. JOB IDENTIFICATION INFORMATION

Department (High Org):	504	Division (Low Org):	5041
Contact for this Study	Name: Tamara Molitor	Email: tmolitor@mitchellairport.com	
	Title: Accounting Supervisor - Operations	Phone: 414-747-3721	
Current Job Title:	Senior Accountant	Current Job Code:	
Health Screen Level:	00-None	Background Check Level:	6- Airport
Job Reports To:	Title: Accounting Supervisor - Operations		
Request Type:	<input type="checkbox"/> Establish New <input checked="" type="checkbox"/> Review <input type="checkbox"/> Reclassification <input type="checkbox"/> Reallocation <input type="checkbox"/> Update Description <input type="checkbox"/> Other, Specify		

B. JUSTIFICATION STATEMENT

1. Attach an organizational chart.
2. Explain the events or changes that made this request necessary.
Position is vacant, and an update is made as part of the recruitment process.

C. ABOUT THE JOB

Job Status:	<input checked="" type="checkbox"/> Regular Full-Time	<input type="checkbox"/> Regular Part-Time	<input type="checkbox"/> Seasonal	<input type="checkbox"/> Contract
Shift:	<input checked="" type="checkbox"/> Day	<input type="checkbox"/> Evening	<input type="checkbox"/> Night	<input type="checkbox"/> Other:
Hours Per Week:	<input type="checkbox"/> >40 Hours	<input checked="" type="checkbox"/> 32-40 Hours	<input type="checkbox"/> 20-32 Hours	<input type="checkbox"/> <20 Hours
Travel:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, % Travel			
Will This Job Supervise/Manage?	<input type="checkbox"/> Supervise <input type="checkbox"/> Manage # of Direct Reports:		<input checked="" type="checkbox"/> N/A	
Fiscal Responsibility: Responsible for annual operating budget for department(s)/division(s)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please provide total amount?			

D. JOB SUMMARY:

Briefly state, in several sentences, the principle purpose or function of the job. Respond by describing **What** the job is, **What** its major objective is, and **Why** does it exist.

This position is responsible for compilation, calculation and billing of both airline and concessions based on the provisions of each tenant’s contract and the applicable current rates and charges. These billings include airline monthly landing fees, per use fees, supplemental aircraft parking, common usage, aviation fuel flowage, rents, utility resale billing, nonstandard and non-provisioned invoicing. Tenant Concession Billing, and annual true-up using annual audit reports for car rental, food and beverage, gift and novelties, advertising and other miscellaneous revenue streams. Performs Direct Billing of miscellaneous services to airlines, provision billing rules into the Airport Operations Data Base (AODB currently GCR). Completes revenue journal entries and reclasses as needed. Assists in monitoring the MKE Accounting email billing inquiry inbox and phone call for issue resolution. Analytical projects and other duties as assigned including year end duties including the airline Fees Paid annual report which is used by management to generate the annual settlement with signatory airlines.

E. ESSENTIAL DUTIES/RESPONSIBILITIES:

JOB RESPONSIBILITY LIST: Please describe the major elements of the job. List only the major functions, separately, in order of importance. Provide a one or two line descriptive statement for each duty so that someone not familiar with this kind of work can understand it. Weight the approximate percentage of allocated work time for each functional work activity (Round to the nearest **10%**). We do not need to know HOW the function is to be performed, but rather, WHAT it is to be performed. **Percentages should add up to 100%**

1.	<input checked="" type="checkbox"/> Original <input type="checkbox"/> New	Job Duty: Airline Invoicing and Analysis	% of Time: 35
	<i>Descriptive:</i> Compiles and compares airline self-reporting to Passur reporting file and calculates and invoices signatory and non-signatory airlines for landing fees, rent, common use, security, supplemental aircraft parking and utilities (water, gas, and electric). Position requires input and feedback on all current and proposed rate structures. Airline revenue is approximately \$25-\$30 M annually. Responsible for quarterly review of airline seats and dimensions.		
2.	<input checked="" type="checkbox"/> Original <input type="checkbox"/> New	Job Duty: Airport Tenant Invoicing	% of Time: 25
	<i>Descriptive:</i> Prepares monthly invoices for concession rent and percent of sales, fuel/oil flowage, badging, hanger rent, landside other building rent, airline rent, Fixed Based Operator (FBO) for two airports, and MKE office park tenant building rent. All invoicing requires review and understanding of customer contracts and strong working relationships with the properties department and tenants. All other income from airlines, concessions other billed sources excluding parking revenue total approximately \$50-\$55 M annually.		
3.	<input checked="" type="checkbox"/> Original <input type="checkbox"/> New	Job Duty: Year end and Other Analytical Duties as assigned.	% of Time: 20
	<i>Descriptive:</i> Completes year end reconciliations for audit, reviews each period close during year end process, and completes other Miscellaneous analytical projects and tasks as assigned. Monitor, reply, route and resolve all accounting mailbox emails. Regularly is assigned other analytical requests to perform tenant revenue or space analysis.		
4.	<input checked="" type="checkbox"/> Original <input type="checkbox"/> New	Job Duty: Direct Billing to Airlines for Services and Billing rules entry and GCR Provision Clean Up assistance to Properties	% of Time: 10
	<i>Descriptive:</i> Invoicing for direct additional special cost items such as bus service during diversions, etc. Work with properties and others for regular GCR AODB review and clean-up of both billing and properties provisions. Coordinate implementation of timing for new annual rates for rent and airline fees. Miscellaneous other adjustments relating to revenue are researched and entered in financial system or GCR as necessary.		

5.	<input checked="" type="checkbox"/> Original <input type="checkbox"/> New	Job Duty: Tenant Concession, Rental Car, and Advertising Audit and true up.	% of Time: 10
	<i>Descriptive:</i> Conducts an internal audit of concessions, car rental, and advertising tenants resulting in a true-up of base vs. sales-based rent. Based on external tenant audit results to internal audit; tenant is notified and either an invoice or credit memo is issued if necessary. Also researches and resolves all general tenant inquiries. Concessions revenue totals \$18-\$25 M per annually.		
6.	<input type="checkbox"/> Original <input type="checkbox"/> New	Job Duty:	% of Time:
	<i>Descriptive:</i>		
7.	<input type="checkbox"/> Original <input type="checkbox"/> New	Job Duty:	% of Time:
	<i>Descriptive:</i>		
8.	<input type="checkbox"/> Original <input type="checkbox"/> New	Job Duty:	% of Time:
	<i>Descriptive:</i>		
9.	<input type="checkbox"/> Original <input type="checkbox"/> New	Job Duty:	% of Time:
	<i>Descriptive:</i>		

10.	<input type="checkbox"/> Original <input type="checkbox"/> New	Job Duty:	% of Time:
	Descriptive:		

F. EQUIPMENT, TOOLS & MATERIALS, PERSONAL COMPUTERS, SOFTWARE

Please list all equipment, tools or materials required to perform the job along with the frequency.	Frequency			Type of Equipment
	Daily	Weekly	Monthly	
1. Machinery: (i.e. Vehicles, Motorized Equipment, Heavy Machinery, etc)				
2. Hand Tools/Instruments: (i.e. Power Tools, Equipment, Weapons, etc.)				PC, Calculator, general office environment
3. Driving required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	List License Types: (Required)			
	List License Types: (Preferred)			
4. Personal vehicle required?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
5. Please list all <u>Technology, Systems and Software Knowledge</u> required to perform the job:				
Basic	Intermediate	Advanced		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Knowledge of all related computer and software applications, such as word processing and spreadsheets.	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Other:	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other:	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other:	

G. JOB COMPETENCIES

Internal/External Contacts: Please select all that apply.	
<input checked="" type="checkbox"/>	Exchange of basic information with internal and/or external contacts.
<input checked="" type="checkbox"/>	Maintain sensitive or confidential information.
<input checked="" type="checkbox"/>	Explain and gather information, answer queries, or provide assistance to internal and/or external contacts.
<input type="checkbox"/>	Persuade, conform or recommend course of action with internal and/or external contacts.
<input type="checkbox"/>	Perform with a high degree of authority in securing understanding and cooperation with internal and/or external contacts.
<input checked="" type="checkbox"/>	Maintain a continuing working relationship that can have a significant effect on the success of the organization.

Communication Skills: Select the level of language (ability to read, write and speak needed to successfully accomplish the essential duties of the job.) Please select all that apply.	
<input checked="" type="checkbox"/>	Read, write and comprehend simple instructions, reports, short correspondence and memos.
<input checked="" type="checkbox"/>	Speak effectively before both internal and/or external groups.
<input type="checkbox"/>	Read, analyze, and interpret safety rules, operating/maintenance instructions and procedure manuals, scientific/technical journals and procedures, government regulations, financial and legal documents.
<input type="checkbox"/>	Prepare and/or present written communications that pertain to controversial and complex topics.

Decision-Making: Please select <u>only one</u> of the following:	
<input type="checkbox"/>	Makes minimal decision-making responsibility.
<input type="checkbox"/>	Makes decisions of responsibility involving evaluation of information; decisions may require development or application of alternatives or precedents.

<input type="checkbox"/>	Makes decisions of responsibility and final results that affect more than one department or a department with multiple units; substantial analysis is required and many factors must be weighed before a decision can be reached.
<input type="checkbox"/>	Makes decisions of responsibility and final recommendations, which may result in the formulation of strategic plans of action to achieve the broad objectives for the organization; involves long-range future planning including scope, direction and goals.

Complexity, Judgment and Problem Solving: Please select all that apply.	
<input checked="" type="checkbox"/>	Understand and follow instructions.
<input checked="" type="checkbox"/>	Execute decisions within limits of standard policy and procedures.
<input type="checkbox"/>	Interpret and adapt to established practices and procedures using independent judgment to meet situations to which applications are not clearly defined.
<input type="checkbox"/>	Perform within difficult or complex working conditions or situations not easily evaluated; decisions require considerable judgment, initiative and ingenuity in areas there is little precedent.
<input type="checkbox"/>	Act independently in the formulation and administration of policies and programs for major departments or functions.

H. WORKING CONDITIONS

What are the physical, mental and environment demands for this job? Functions identified must coincide with the descriptive statement of essential duties and responsibilities for this job. The functions should focus on what is to be done and the processes traditionally used to achieve end results. For each of the following functional requirements, indicate the frequency in which it occurs in this job.

<u>PHYSICAL DEMANDS</u>	N/A	Seldom (<25%)	Occasional (25% - 50%)	Frequent (50% - 75%)	Always (>75%)		
Standing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Walking/Running	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Sitting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Reaching	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Climbing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Driving	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Bending/Kneeling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Hearing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Talking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Visual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Typing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Writing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Fine Dexterity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Manual Dexterity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Upper Extremity Repetitive Motion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Lifting/Carrying (lbs.)	<input type="checkbox"/> up to 05	<input checked="" type="checkbox"/> up to 10	<input type="checkbox"/> up to 15	<input type="checkbox"/> up to 20	<input type="checkbox"/> up to 25	<input type="checkbox"/> up to 30	<input type="checkbox"/> up to <input type="text"/>
Pushing/Pulling (lbs.)	<input type="checkbox"/> up to 05	<input checked="" type="checkbox"/> up to 10	<input type="checkbox"/> up to 15	<input checked="" type="checkbox"/> up to 20	<input type="checkbox"/> up to 25	<input type="checkbox"/> up to 30	<input type="checkbox"/> up to <input type="text"/>

<u>NON-PHYSICAL DEMANDS</u>	N/A	Seldom (<25%)	Occasional (25% - 50%)	Frequent (50% - 75%)	Always (>75%)
Analysis/Reasoning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Communication/Interpretation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Math/Mental Computation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sustained Mental Activity (i.e. auditing, problem solving, grant writing, composing reports)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<u>ENVIRONMENTAL DEMANDS</u>	N/A	Seldom (<25%)	Occasional (25% - 50%)	Frequent (50% - 75%)	Always (>75%)
------------------------------	-----	---------------	------------------------	----------------------	---------------

Work Independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Task Changes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tedious/Exacting Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
High Volume Public Contact	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dust	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Temperature Extremes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Loud Noises	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physical Danger	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Toxic Substances (i.e. solvents, pesticides, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WORK SCHEDULE: Please select all that apply.	
<input checked="" type="checkbox"/>	Routine shifts hours. Infrequent overtime, weekend, or shift rotation.
<input type="checkbox"/>	Considerable irregularity of hours due to frequent overtime, weekend or shift rotation.
<input type="checkbox"/>	Regular and/or frequent on-call availability; nature of work frequently requires irregular, unpredictable or particularly long hours.

DEMANDS/DEADLINES: Please select all that apply.	
<input checked="" type="checkbox"/>	Little or no stress created by work, employees or public.
<input checked="" type="checkbox"/>	Intermittent or cyclical work pressures with occasional exposure to high stress work environments.
<input type="checkbox"/>	High volume and variable work demands and deadlines that impose strain on a routine basis; frequent direct contact with individuals or exposure to highly stressful situation, demands or pressures.

I. EDUCATION, LICENSE, AND EXPERIENCE

EDUCATION	
Please indicate the MINIMUM educational level required:	
<input type="checkbox"/>	HS Diploma/GED
<input type="checkbox"/>	Associate's Degree
<input checked="" type="checkbox"/>	Bachelor's Degree
<input type="checkbox"/>	Graduate Degree
<input type="checkbox"/>	Post Graduate Degree (PhD)
<input type="checkbox"/>	Professional Degree (Law, Medicine, etc.)
<input type="checkbox"/>	Other:

LICENSE/CERTIFICATION: (Please complete Section F on Page 3 for Driving Requirements/License(s))	
What license(s), certification/certificate(s), registration(s), or other regulatory requirements/training:	

WORK EXPERIENCE	
Please indicate the MINIMUM number of years of practical experience required.	
<input type="checkbox"/>	No experience
<input type="checkbox"/>	Less than one year
<input type="checkbox"/>	One to two years
<input checked="" type="checkbox"/>	Two to five years
<input type="checkbox"/>	Five or more years

SUPERVISORY/MANAGEMENT EXPERIENCE	
Please indicate the MINIMUM number of years of supervisory/management experience required.	
<input checked="" type="checkbox"/>	No experience
<input type="checkbox"/>	Less than one year
<input type="checkbox"/>	One to three years

<input type="checkbox"/> Three to five years	Area(s) of experience:
<input type="checkbox"/> Five or more years	Area(s) of experience:

Supervisory/Managerial: If applicable, select the appropriate level of responsibility.

<input type="checkbox"/>	Level 1 General instructing, scheduling, and reviewing the work of others performing the same or directly related work. Acts as "lead worker". Functional supervision only. Recommends personnel actions (hiring, termination, pay changes, etc.) but does not independently conduct.
<input type="checkbox"/>	Level 2 Scheduling, supervision, and evaluation of work of employees who perform similar work assignments. Conducts all aspects of personnel actions (hiring, termination, pay changes, etc.).
<input type="checkbox"/>	Level 3 Scheduling, supervision and evaluation of work as a "manager" of the first line supervisors; or perform supervision of workers who perform distinct and separate blocks of work. Oversees and conducts all aspects of personnel actions (hiring, termination, pay changes, etc.). Are there subordinate supervisors reporting to this job? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many?
<input type="checkbox"/>	Level 4 Scheduling, supervision and evaluation of work as a superior of "managers". Administers through subordinate managers, departmental multi-function programs or operations. Oversees and conducts all aspects of personnel actions (hiring, termination, pay changes, etc.). Are there subordinate supervisors/managers reporting to this job? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many?
<input type="checkbox"/>	Level 5 Scheduling, supervision, and evaluation of work as a superior of those in level 4. Are there subordinate supervisors/managers reporting to this job? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many?

List the names of the Positions and/or Department(s)/Division(s) supervised/managed by this job:

-

J. ADDITIONAL COMMENTS

Please list additional items not covered in this questionnaire that would be helpful to the Compensation Department in understanding this job.

-

Please provide additional information and/or language so that Employment & Staffing can include it in the job announcement (Providing that the Compensation Department has approved).

K. SIGNATURES

SUPERVISOR'S/MANAGER'S CONFIRMATION:

I have completed and/or reviewed the contents of this job evaluation questionnaire and consent to its accuracy.

Supervisor/Manager Signature:

Date:

Department/Division Head Signature:

Date: