

COLLEGE of EDUCATION

EPA Template

Working Title: \_\_\_\_\_

OUC: \_\_\_\_\_

Name: \_\_\_\_\_

Contract Type: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

*PLEASE ATTACH A **WORD DOCUMENT** WITH THE FOLLOWING INFORMATION:*

1. Primary purpose of position
2. Primary function of Organizational Unit
3. Duties and responsibilities
4. Other work responsibilities
5. Number of employees supervised and percentage of time spent
6. Work schedule
7. Proposed minimum education/experience
8. Required skills
9. Preferred experience, credentials, qualifications, certifications
10. Required Licensure or Certification

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date