

Completing the Management Designee Part IV of the Position Description Questionnaire (PDQ)

Introduction

This job aid explains how to complete the Management Designee section of the Position Description Questionnaire process.

Section I - Part IV – Management Designee PDQ 1 -7
 Section II – Printing the PDQ..... 8 - 9

Navigation Path: <http://apps.das.ohio.gov/hrdpositionquestionnaire/pdqlogin.aspx>

Section I – Management Designee PDQ Part IV

Step	Action	Comments
1.	Log into the Online PDQ	Use the user name and password you were provided.
2.	Enter new password information	Upon initial log in to the system you will be asked to change your password
3.	Click “Log in”	Enter newly created password



Welcome to HRD Position Description Questionnaire

Log into HRD's OnLine PDQ System

User Name:

Password:

Remember me next time.

Forgot Your Password?

Enter your User Name to receive your password.

User Name:

Step	Action	Comments
4.	Select audit review date / title from drop down list.	You will be provided this information at training session.

Welcome to HRD Position Description Questionnaire

User name: ssteenrod
 Role: Manager
 Select Audit
 Review: [Make a Selection] [v]
 Select Supervisor: [Make a Selection] [v] Select Employee: [Make a Selection] [v]

Deadline To Finish PDQ:

Manager Main Menu

Begin Manager's PDQ Survey Part IV

Print PDQ Questions & Answers

Change Your Password

LogOff

5.	Select your Supervisor name from the drop down list.	
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Welcome to HRD Position Description Questionnaire

User name: ssteenrod
 Role: Manager
 Select Audit
 Review: [Make a Selection] [v]
 Select Supervisor: [Make a Selection] [v] Select Employee: [Make a Selection] [v]

Deadline To Finish PDQ:

Manager Main Menu

Begin Manager's PDQ Survey Part IV

Print PDQ Questions & Answers

Change Your Password

LogOff

Step	Action	Comments
6.	Select your employee name from the drop down list.	

Welcome to HRD Position Description Questionnaire

User name: ssteenrod
 Role: Manager
 Select Audit Review: [Make a Selection]
 Select Supervisor: [Make a Selection]
 Select Employee: [Make a Selection]
 Deadline To Finish PDQ: [Not yet determined]

Manager Main Menu

- Begin Manager's PDQ Survey Part IV
- Print PDQ Questions & Answers
- Change Your Password
- LogOff

7.	Click "Begin Manager's PDQ Survey Part IV"	
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Welcome to HRD Position Description Questionnaire

User name: Bill Smith
 Role: Manager
 Select Audit Review: [10/23/2009 - Photojournalist]
 Select Supervisor: [Rita Smith]
 Select Employee: [John Smith]
 Deadline To Finish PDQ: [Not yet determined]

Manager Main Menu

- Begin Manger's PDQ Survey Part IV
- Print PDQ Questions & Answers
- Change Your Password
- LogOff

8.	Read instructions carefully, then click "Begin Part IV of PDQ"	
9.	Review the employee's responses to questions #1 through #30 by clicking "view Emp. Answers" tab.	An alternative to reviewing the answers on the screen is to print the PDQ and review as you answer the questions (see printing PDQ on pg. 8)

Position Description Questionnaire
(Manager)

Employee Name: John Smith
Employee Job Title: Photojournalist
Supervisor Name: Rita Smith

Agency: Natural Resources
Employee Job Code: 82212
Agency: Natural Resources

PART IV: TO BE COMPLETED BY THE MANAGEMENT DESIGNEE

View Question# 40

View Sup Answers

View Emp Answers

←

41. As the management representative, do you agree or disagree with the information furnished by the supervisor and/or the employee? (Select the choice that is appropriate.)

42. MANAGER CERTIFICATION *(Please Press the "Sign and Date" button to sign. Also enter in your work address and phone number.)*

I certify that the statements and responses documented are accurate and complete to the best of my knowledge.

Signed:

Date:

10.	Review the supervisor’s responses to questions #32 through #38 by clicking “view Sup. Answers” tab.	An alternative to reviewing the answers on the screen is to print the PDQ and review as you answer the questions (see printing PDQ on pg. 8)
11.	Then select the question number you would like to review from the drop down list	Then select the question number you would like to review from the drop down list

12.	Complete question # 41	<p>If you agree with the employee & supervisor, proceed to Manager certification section.</p> <p>If you disagree, please check the question you disagree with and enter response in the space provided. (see example)</p>
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Employee Name: John Smith
Employee Job Title: Photojournalist
Supervisor Name: Rita Smith

Agency: Natural Resources
Employee Job Code: 82212
Agency: Natural Resources

PART IV: TO BE COMPLETED BY THE MANAGEMENT DESIGNEE

[View Question# 40](#) [View Sup Answers](#) [View Emp Answers](#)

41. As the management representative, do you agree or disagree with the information furnished by the supervisor and/or the employee? (Select the choice that is appropriate.)

Disagree

Question #: Comments/Correct Response

Employee's Questions & Answers (Part I)

<input type="checkbox"/> Question# 1	
<input type="checkbox"/> Question# 2	
<input type="checkbox"/> Question# 3	

13.	Complete question # 42, then press the "Save" button followed by the "Finish" button	
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Position Description Questionnaire
Audit Review: 02/22/2010 - Wildlife Officer

Employee Name: Bill Gibson
Employee Job Title: Wildlife Officer
Supervisor Name: Ray Gibson

Agency: Natural Resources
Employee Job Code: 22292
Agency: Administrative Services

PART IV: TO BE COMPLETED BY THE MANAGEMENT DESIGNEE

[View Question #41](#) [View Sup Questions](#) [View Emp Answers](#)

41. As the management representative, do you agree or disagree with the information furnished by the supervisor and/or the employee? (Select the choice that is appropriate.)

Agree

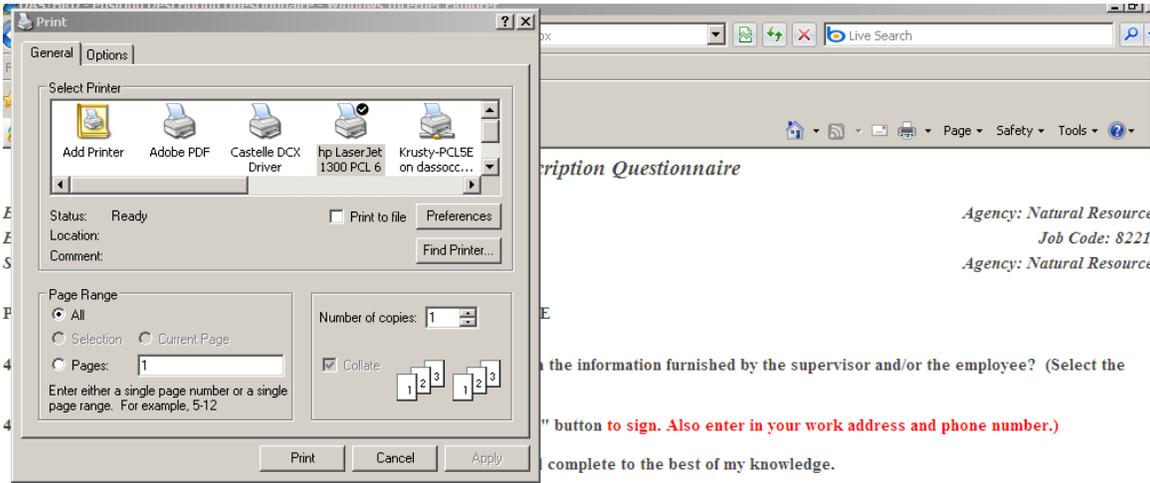
42. **MANAGER CERTIFICATION** (Please Press the "Sign and Date" button to sign. Also enter in your work address and phone number.)

I certify that the statements and responses documented are accurate and complete to the best of my knowledge.

Signed: Julie Gibson Date: 2/22/2010 2:15:47 PM
Work Location/Address: 30 E. Broad St., 27th Floor, Columbus, Ohio 43215
Work Phone: 614-555-5555 ex: (xxx-xxx-xxxx)

[<< Cancel Return to Menu](#) [Save](#) [FINISH](#)

14.	After you click the “Finish” button you will be automatically taken to the print selection screen to print the PDQ	An automatic email will be generated to notify the system administrator that you have completed the part IV of the PDQ.
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Signed: *Bill Smith*

Date: *10/26/2009 9:31:09 AM*

Work Location/Address: *30 E. Broad Street, 27th Floor, Columbus, Ohio 43215*

Work Phone: *614-555-5555*

15.	After you print the PDQ, you will be redirected to the “thank you screen”	
16.	Select the “Click here to return to the main menu” button	

SECTION II – Print PDQ

Step	Action	Comments
17.	Select the audit review date and employee that applies.	Remember: whenever you return to the main menu you must select the audit date, employee name and Supervisor's name to activate the menu.
18.	Here you may select any of the following: Print PDQ Questions & Answers Change Your Password Logoff	

Welcome to HRD Position Description Questionnaire

User name: Bill Smith *Deadline To Finish PDQ: Not yet determined*
Role: Manager

Select Audit Review:
 Select Supervisor: Select Employee:

Manager Main Menu

Begin Manager's PDQ Survey Part IV

Print PDQ Questions & Answers

Change Your Password

LogOff

19.	To print the PDQ, click "Print PDQ Question & Answers"	Your PDQ question and answers will be displayed
20.	Then click "Print PDQ Questions & Answers" in the upper right section of the screen	

**Position Description Questionnaire
(Manager)**

Employee Name: John Smith
Job Title: Photojournalist
Supervisor Name: Rita Smith

Agency: Natural Resources
Job Code: 82212
Agency: Natural Resources

PART IV: TO BE COMPLETED BY THE MANAGEMENT DESIGNEE

- 41. As the management representative, do you agree or disagree with the information furnished by the supervisor and/or the employee? (Select the choice that is appropriate.) *Agree*
- 42. **MANAGER CERTIFICATION** (Please Press the "Sign and Date" button to sign. Also enter in your work address and phone number.)

I certify that the above statements and responses are accurate and complete to the best of my knowledge.

Signed: *Bill Smith*

Date: 10/26/2009 9:31:09 AM

Work Location/Address: 30 E. Broad Street, 27th Floor, Columbus, Ohio 43215

Work Phone: 614-555-5555

Items to remember

1. When returning to the main menu you must always select the Audit Review date to activate the menu items.
2. Edits to the PDQ can only be made prior to the deadline date and prior to clicking the finish button within the PDQ.
3. An alternative to reviewing the answers on the screen is to print the PDQ and review as you answer the questions.
4. If you have questions or issues when completing the Position Description Questionnaire please contact the Office of Organizational Development, Classification and Compensation Unit at 614.387.0685 or email compensation@das.state.oh.us