Salt Lake County Job Description

 **(Job Title - Intern)**

**DEPARTMENT:** (Enter Department) **DIVISION:** (Enter Division/Org #)

**JOB CODE:** (000) **GRADE:** (000) **FLSA STATUS:** (Exempt or Non-Exempt)

**SALARY PLAN:** (GEN or TRD) **EFFECTIVE DATE:** (Enter Date: mm/dd/yyyy)

**SAFETY SENSITIVE:** (Yes or No)

**JOB SUMMARY** (The job summary describes the general nature, level and purpose of the job in a brief and concise manner.)

**MINIMUM QUALIFICATIONS** (Use RECOMMENDED QUALIFICATONS when the job is appointed. Minimum qualifications describe the education and/or experience required to perform the essential functions of the job. In addition, list any licenses or certifications that are required by law or statute.)

**ESSENTIAL FUNCTIONS** (The essential functions describe the main duties and responsibilities of the job and are listed according to the sequence that the duties/tasks are performed, in order of their importance, and are based on the amount of time that the incumbent devotes to each duty/task.)

*The following duties and responsibilities are intended to be representative of the work performed by the incumbent(s) in this position and are not all-inclusive. The omission of specific duties and responsibilities will not preclude it from the position.*

*Applicants must be prepared to demonstrate the ability to perform the essential functions of the job with or without a reasonable accommodation.*

**KNOWLEDGE, SKILLS AND ABILITIES (KSA)** (There must be a direct link between the essential functions and the KSA’s.)

**Knowledge of:** (Knowledge describes the things that the employee needs to know; knowledge is usually acquired through education and training.)

**Skills and Abilities to:** (Skills and Abilities describe the activities the employee must be able to do; skills and abilities are typically acquired through experience, developed proficiencies, and natural talents.)

**WORKING CONDITIONS AND PHYSICAL REQUIREMENTS** (Describe the physical environment and working conditions in which the work is performed.)

**IMPORTANT INFORMATION REGARDING THIS POSITION** (For example, work schedules, working in multiple locations, or with high risk populations.)

Revised Date/Consultant’s Initials: (mm/dd/yyyy initials)