



THE STATE OF FLORIDA  
**JUSTICE ADMINISTRATIVE COMMISSION**

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*Public Defender*  
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*State Attorney*

**MEMORANDUM #060---12HR**

TO: Agency Administrators

FROM: Carolyn Horwich, J.D., Director of Human Resources

THROUGH: Rip Colvin, Executive Director

SUBJECT: Position Description "Reports to" Field

DATE: November 21, 2012

Great strides have been made by all entities administratively served by the Justice Administration Commission in modernizing the Position Description form used by BOMS users. As part of this effort, the form now contains a field to enter the person or position to whom the employee reports. (See attached)

As the next step in this initiative, we ask that each of you, including those of you who do not use BOMS, to select one position in your agency for all your employees to report to so that we may have the Department of Management Services conduct mass loads with that information. You may select the Elected Official, the Director of Human Resources, or any other senior management level position. In doing so, a more logical personnel structure will result, and you will have greater control of your own organization. Once you have identified the position, please provide that information directly to Jamie Johnson, Senior Human Resources Coordinator.

If you have any questions, please do not hesitate to contact me or Jamie Johnson at 850.488.2415, ext. 293, or at [Jamie.Johnson@justiceadmin.org](mailto:Jamie.Johnson@justiceadmin.org).

Thank you.

**POSITION DESCRIPTION**

**Senior Management Services**  **SMS Retirement/Benefits**

**Senior management Service**  **Benefits Only**

**Regular Service Employee**

Position Number:	Security Role Code: <input type="checkbox"/> Employee <input type="checkbox"/> People First Org Access
Employee Name:	FTE:
Name of Circuit:	
Present Headquarters/County Code:	New Headquarters/County Code:
Present Position Location Address:	New Position Location Phone Number:
Present Position County Code:	New Position County Code:
Present Org Code:	New Org Code:
Present Pay Plan:	New Pay Plan:
Present Class Title:	New Class Title:
Present Class Code:	New Class Code:
Present Reports to:	New Reports to:
CJIP Incentive Payment <input type="checkbox"/>	Effective Date:

**Reason for submitting this form:**

Classification Change: \_\_\_\_\_

County Change: \_\_\_\_\_

Establish New Position: \_\_\_\_\_

Delete Position: \_\_\_\_\_

FTE Change: \_\_\_\_\_

Other (explain below): \_\_\_\_\_

Approved By:

Assistant Executive Director

Date:

DUTIES AND RESPONSIBILITIES: (Discretionary on part of agency; not required by JAC)