

## Fair Labor Standards Act (FLSA) Exemption Checklist

## LEARNED PROFESSIONAL EXEMPTION

To be an exempt learned professional an employee must have a primary duty (principal, main, major, most important) that is the performance of work requiring advanced knowledge, including the consistent exercise of discretion and independent judgment, in a field of science or learning where the advanced knowledge is acquired by prolonged course of specialized intellectual instruction. Examples include lawyers, doctors, engineers, accountants, architects, librarians, nurses and scientists.

POSITION INFORMATION			
Position Title:			
Position Number:			
Division and Department:			
Department/Office Director:			
Incumbent:			
Immediate Supervisor:			
Preparer/Business Officer:			

**Directions:** Click on each box that applies to this position to mark it with an "x". Only select the boxes that are applicable to this position. Give **specific** and **detailed** answers where an explanation or description is requested. **Upload the completed form under the Supplemental Documents tab to attach it to the position action request in NinerTalent.** 

CHECKLIST		
Is the employee compensated on a salary basis at a rate not less than \$684 per week?	YES □ If Yes, please provide specifics below.	NO □ If not, stop. The employee is not exempt.
If yes, please describe the employee's primary duty.		
Does the employee's primary duty involve the performance of work requiring advanced knowledge (defined as work which is predominantly intellectual and includes work using constant exercise of discretion and independent judgment) in a recognized field of science or learning?	YES □ If Yes, please provide specifics below.	NO □ If not, stop. The employee is not exempt.
"advanced knowledge" as described above:	1. 2. 3.	

		4. 5.	
Does the employee's primary duty require that his or her advanced knowledge be used to analyze, interpret, or make deductions from varying facts or circumstances?		YES □ If Yes, please provide specifics below.	NO □ If not, stop. The employee is not exempt.
lf yes, g	ive specific details.		
Does the employee have the authority to formulate, affect, interpret or implement management policies or operating practices?		YES □ If Yes, please provide specifics below.	NO □ If not, stop. The employee is not exempt.
lf yes, g	ive specific details.		
Does the employee perform work that affects the business operations to a substantial degree?		YES □ If Yes, please provide specifics below.	NO 🗆
lf yes, g	ive specific details (size, scope, authority)		
Does the employee have the authority to commit the university in matters that have significant financial or legal impact? Does the employee have the authority to negotiate or bind the university on matters of significance.		YES □ If Yes, please provide specifics below.	NO □
If yes, g	ive specific details (size, scope, authority)		
Does the employee have authority to waive or deviate from established policies and procedures without prior approval?		YES □ If Yes, please provide specifics below.	NO □
If yes, g	ive specific details.		
Does the employee provide consultation or expert advice to management?		YES 🗆	NO □
lf yes, g	ive specific details.		
Does the employee have involvement in planning long or short-term business objectives?		YES 🗆	NO 🗆
Does the employee develop guidebooks, manuals, or other policies and procedures for the employer or the employer's customers?		YES 🗆	NO 🗆
Does the employee investigate and resolve matters of significance on behalf of management?		YES □ If Yes, please provide specifics below.	NO 🗆
lf yes, g	ive specific details.		
Does the employee represent the university in handling complaints, arbitrating disputes, or resolving grievances?		YES □ If Yes, please provide specifics below.	NO 🗆
lf yes, g	ive specific details.		
CERT	TIFICATION		
	By checking this box, I certify that all information provided on this form is to the best of my knowledge is true, accurate, and complete. I understand that this information will be used to determine overtime eligibility or ineligibility for any incumbent assigned to this position		
	By checking this box, I certify that I uploaded this completed form under the Supplemental Documents tab to attach it to the position action request in the NinerTalent system for HR review and approval.		