

**POSITION DESCRIPTION** (Please Read Instructions on the Back)

1. Agency Position No.  
S000044

2. Reason for Submission <input type="checkbox"/> Redescription <input type="checkbox"/> Reestablishment	3. Service <input type="checkbox"/> Hdqtrs <input checked="" type="checkbox"/> Field	4. Employing Office Location	5. Duty Station	6. OPM Certification No.
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7. Fair Labor Standards Act <input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Nonexempt	8. Financial Statements Required <input type="checkbox"/> Executive Personnel Financial Disclosure <input checked="" type="checkbox"/> Employment and Financial Interest	9. Subject to IA Action <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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10. Position Status <input type="checkbox"/> Competitive <input type="checkbox"/> Excepted (Specify in Remarks) <input type="checkbox"/> SES (Gen.) <input type="checkbox"/> SES (CR)	11. Position Is <input checked="" type="checkbox"/> Supervisory <input type="checkbox"/> Managerial <input type="checkbox"/> Neither	12. Sensitivity <input checked="" type="checkbox"/> 1--Non-Sensitive <input type="checkbox"/> 2--Noncritical Sensitive <input type="checkbox"/> 3--Critical <input type="checkbox"/> 4--Special Sensitive	13. Competitive Level Code	14. Agency Use
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15. Classified/Graded by	Official Title of Position	Pay Plan	Occupational Code	Grade	Initials	Date
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a. Office of Personnel Management						
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b. Department, Agency or Establishment	Supervisory Fire Management Specialist	GS	401	14		
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c. Second Level Review						
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d. First Level Review	Department of the Interior, FLERT Specialist, <u>Jaye Rappin</u> This PD has been approved as follows under 5 USC 8336(c) and 8412(d) <input checked="" type="checkbox"/> Firefighter <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Secondary/Administrative <input type="checkbox"/> Sec/Supvy Approval Date: <u>July 29, 2003</u>					
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e. Recommended by Supervisor or Initiating Office						
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16. Organizational Title of Position (if different from official title) Regional Fire Management Coordinator	17. Name of Employee (if vacant, specify)
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18. Department, Agency, or Establishment Department of the Interior	c. Third Subdivision
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a. First Subdivision U.S. Fish and Wildlife Service	d. Fourth Subdivision
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b. Second Subdivision Regions	e. Fifth Subdivision
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19. Employee Review-This is an accurate description of the major duties and responsibilities of my position.	Signature of Employee (optional)
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20. **Supervisory Certification.** I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the knowledge that this information is to be used for statutory purposes relating to appointment and payment of public funds, and that false or misleading statements may constitute violations of such statutes or their implementing regulations.

a. Typed Name and Title of Immediate Supervisor	b. Typed Name and Title of Higher-Level Supervisor or Manager (optional)
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Signature _____	Date _____	Signature _____	Date _____
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21. <b>Classification/Job Grading Certification.</b> I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards.	22. Position Classification Standards Used in Classifying/Grading Position U.S. OPM PCS General Schedule Supervisory Guide, TS-123, 4/93.
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Typed Name and Title of Official Taking Action HR Specialist	Information for Employees. The standards, and information on their application, are available in the personnel office. The classification of the position may be reviewed and corrected by the agency or the U.S. Office of Personnel Management. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the U.S. Office of Personnel Management.
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23. Position Review	Initials	Date								
a. Employee (optional)										
b. Supervisor										
c. Classifier										

24. Remarks FPL-GS-14  
APPROVED FOR SERVICEWIDE USE. Sheryl Auger 3-7-03

25. Description of Major Duties and Responsibilities (See Attached)