

# POSITION DESCRIPTION (Please Read Instructions on the Back)

1. Agency Position No.

000071

2. Reason for Submission

Redescription  
 Reestablishment  
 Explanation (Show any positions replaced)

3. Service

New  Dept'l  Field  
 Other

4. Employing Office Location

7. Fair Labor Standards Act

Exempt  Nonexempt

5. Duty Station

8. Employment/Financial Stmt. Required

Yes  No

9. Subject to IA Action

Yes  No

SPD

10. Position Status

Competitive  
 Excepted (Specify)

11. Position is

Supervisory  
 Managerial  
 Neither

12. Sensitivity

Critical  
 Noncritical  
 Nonsensitive

13. Competitive Level Code

M70

14. Agency Use

15. Classified/Graded by	Official Title of Position	Pay Plan	Occupational Code	Grade	Initials	Date
a. Civil Service Commission						
b. Department, Agency, or Establishment						
c. Bureau						
d. Field Office	Administrative Officer	GS	0341	9		9/27/02
e. Recommended by Supervisor or Initiating Office						

16. Organizational Title of Position (if different from official title)

17. Name of Employee (if vacancy, specify)

18. Department, Agency, or Establishment

Department of Interior

c. Third Subdivision

a. First Subdivision

U.S. Fish and Wildlife Service

d. Fourth Subdivision

b. Second Subdivision

Region

e. Fifth Subdivision

19. Employee Review. This is an accurate description of the major duties and responsibilities of my position.

Signature of Employee (optional)

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)

Signature

Date

Signature

Date

21. Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U. S. Code, in conformance with standards published by the Civil Service Commission or, if no published standards apply directly, consistently with the most applicable published standards.

22. Standards Used in Classifying/Grading Position

USOPM Job Family PCS for Professional & Admin work in Acctg & Bdgt, GS-0500, dtd 12/2000 and Admin work in HRM group, dtd 12/2000 \* (Cont)

Typed Name and Title of Official Taking Action

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 Civil Service Commission. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the Commission.

Signature

Date

23. Position Review	Initials	Date								
a. Employee (optional)										
b. Supervisor										
c. Classifier										

24. Remarks

\*USOPM PCS for Administrative Officer, GS-0341 dtd 2/68.

*Carlynn Mack-Otting*  
 Lead Human Resources Specialist R5

*9/27/02*  
 Date

*Bearl Inge 4-28-03*

25. Description of Major Duties and Responsibilities (see attached)

APPROVED FOR SERVICEWIDE USE