

<b>POSITION DESCRIPTION</b> (Please Read Instructions on the Back)										1. Agency Position No.			
2. Reason for Submission <input type="checkbox"/> Redescription <input checked="" type="checkbox"/> New <input type="checkbox"/> Reestablishment <input type="checkbox"/> Other		3. Service <input type="checkbox"/> Hdqtrs <input checked="" type="checkbox"/> Field		4. Employing Office Location		5. Duty Station		6. OPM Certification No.		9. Subject to IA Action <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Explanation (Show any positions replaced)				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 type="checkbox"/> Employment and Financial Interest		12. Sensitivity <input checked="" type="checkbox"/> 1-Non-Sensitive <input type="checkbox"/> 3-Critical <input type="checkbox"/> 2-Noncritical Sensitive <input type="checkbox"/> 4-Special Sensitive		13. Competitive Level Code			
10. Position Status <input checked="" type="checkbox"/> Competitive <input type="checkbox"/> Excepted (Specify in Remarks) <input type="checkbox"/> SES (Gen.) <input type="checkbox"/> SES (CR)		11. Position Is <input type="checkbox"/> Supervisory <input type="checkbox"/> Managerial <input checked="" type="checkbox"/> Neither		Pay Plan		Occupational Code		Grade		14. Agency Use *DOI032			
15. Classified/Graded by		Official Title of Position				Pay Plan		Occupational Code		Grade			
a. Office of Personnel Management		Fire Management Specialist (Planning)				GS		401		11			
b. Department, Agency or Establishment		Department of the Interior, FLERT Specialist				CB Sloan				6/6/11 9/30/05			
c. Second Level Review		This PD has been approved as follows under 5 USC 8336(c) and 8412(d)											
d. First Level Review		<input checked="" type="checkbox"/> Firefighter <input type="checkbox"/> Law Enforcement Primary Secondary/Administrative Spec/Supvy											
e. Recommended by Supervisor or Initiating Office		Approval Date November 16, 2004											
16. Organizational Title of Position (if different from official title)						17. Name of Employee (if vacant, specify)							
18. Department, Agency, or Establishment Department of the Interior						Third Subdivision							
a. First Subdivision BIA BLM FWS NPS						Fourth Subdivision							
b. Second Subdivision						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 relationship, 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.						b. Typed Name and Title of Higher-Level Supervisor or Manager (optional)							
a. Typed Name and Title of Immediate Supervisor						Signature							
Signature						Date							
21. Classification and 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 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 Handbook of Occupational Groups and Families, August 2001. Part I of the Forestry Series, GS-460, Jun 1965 TS-57, Dec 1979, TS-39.							
Typed Name and Title of Official Taking Action Winford G. Hooker, DOI, PMB Chief, Division of Position Classification and Pay						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.							
Signature Winford G. Hooker						Date 9/30/05							
23. Position Review		Initials		Date		Initials		Date		Initials		Date	
a. Employee (optional)													
b. Supervisor													
c. Classifier													
24. Remarks													
25. Description of Major Duties and Responsibilities (See Attached)													

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 06/01/05

\*Agency Use Code should be entered in FPPS as last six digits of Position Allocation Number.