

POSITION DESCRIPTION (Please Read Instructions on the Back)

1. Agency Position No.
S000303

2. Reason for Submission <input type="checkbox"/> Redescription <input type="checkbox"/> Reestablishment <input type="checkbox"/> New <input type="checkbox"/> Hdqtrs <input checked="" type="checkbox"/> Field <input type="checkbox"/> Other		3. Service		4. Employing Office Location		5. Duty Station		6. OPM Certification No.	
Explanation (Show any positions replaced) Noncompetitive promotion potential to the GS-06 level; PN: S000302		7. Fair Labor Standards Act <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Nonexempt		8. Financial Statements Required <input type="checkbox"/> Executive Personnel Financial Disclosure <input type="checkbox"/> Employment and Financial Interest		9. Subject to IA Action <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		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		12. Sensitivity <input type="checkbox"/> 1--Non-Sensitive <input type="checkbox"/> 3--Critical <input checked="" type="checkbox"/> 2--Noncritical Sensitive <input type="checkbox"/> 4--Special Sensitive		14. Agency Use FPL: 07			

15. Classified/Graded by	Official Title of Position	Pay Plan	Occupational Code	Grade	Initials	Date
a. Office of Personnel Management						
b. Department, Agency or Establishment						
c. Second Level Review	Wildlife Inspection Assistant	GS	1802	05	jh	4-8-09
d. First Level Review						
e. Recommended by Supervisor or Initiating Office						

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		c. Third Subdivision	
a. First Subdivision U.S. Fish and Wildlife Service		d. Fourth Subdivision	
b. Second Subdivision Office of Law Enforcement		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 <u>Act. Dep. Chief</u> <u>Julian Paul</u> Date <u>7-22-08</u>	

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 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
OPM, Compliance Inspection and Support Series, GS-1802, TS-45, 10/80; Aid and Technical Work in the Biological Sciences Series, GS-0400, TS-111, 12/91

Typed Name and Title of Official Taking Action
Joyce M. Hayes
Human Resources Specialist
Signature Joyce M. Hayes Date 4-8-09

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 from FLSA, is available from the personnel office or the U.S. Office of Personnel Management.

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

24. Remarks
Background Investigation: MBI Drug Testing: No This SPD is approved for Service-wide use

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