

POSITION DESCRIPTION (Please Read Instructions on the Back)

1. Agency Position No.
S000345

2. Reason for Submission: Redescription New Reestablishment Other
 3. Service: Hdqtrs Field

4. Employing Office Location
 5. Duty Station
 6. OPM Certification No.

7. Fair Labor Standards Act: Exempt Nonexempt
 8. Financial Statements Required: Executive Personnel Financial Disclosure Employment and Financial Interest
 9. Subject to IA Action: Yes No

10. Position Status: Competitive Excepted (Specify in Remarks) SES (Gen.) SES (CR)
 11. Position Is: Supervisory Managerial Neither
 12. Sensitivity: 1--Non-Sensitive 2--Noncritical Sensitive 3--Critical 4--Special Sensitive
 13. Competitive Level Code
 14. Agency Use: BUS: 7777

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 Biologist	GS	0486	09	LJ	
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 & 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 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 Job Family Guide for Professional Work in the Natural Resources and Biological Science Group, GS-0400, 09/05

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.

23. Position Review	Initials	Date	Initials	Date	Initials	Date	Initials	Date	Initials	Date
a. Employee (optional)										
b. Supervisor										
c. Classifier	CK	8/25/09								

24. Remarks No changes can be made to this PD except for amendments. Risk Designation: Moderate
 FPL: 11 (see S000346) Risk Designation: Moderate Drug Test: No

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

08/25/09: Added SOD statement to Block 2 and Updated Remarks to read: Risk Designation: Moderate, Drug Test: No. CK King