

# Government forms

**POSITION DESCRIPTION**

1. Check one:  
 New  Field  2. Official headquarters  
 3. Reason for submission:  
 (a) If this position replaces another, e., a change of duties in an existing position, identify such position by title, allocation (series, grade), and position number.  
 (b) Other (Specify):

4. Agency position No.  
 5. U. S. C. certification No.  
 6. Date of certification  
 7. Date received from C. S. C.

8. CLASSIFICATION ACTION

ALLOCATION BY	CLASS TITLE OF POSITION	CLASS			INITIALS	DATE
		Service	Series	Grade		
a. Civil Service Commission						
b. Department, agency, or establishment						
c. Bureau						
d. Field office						
e. Recommended by including office						

9. Organizational title of position (if any) 10. Name of employee (if vacancy, specify P-1, E, R, or D)

11. Department, agency, or establishment\*  
 a. Third subdivision  
 b. First subdivision  
 c. Second subdivision  
 d. Fourth subdivision  
 e. Fifth subdivision

12. This is a complete and accurate description of the duties and responsibilities of my position.  
 (Signature of employee) (Date)

13. This is a complete and accurate description of the duties and responsibilities of this position.  
 (Signature of immediate supervisor) (Date)  
 Title:

14. Certification by head of bureau, division, field office, or designated representative  
 (Signature) (Date)  
 Title:

15. Certification by department, agency, or establishment  
 (Signature) (Date)  
 Title:

16. Description of duties and responsibilities (See Guide to Position Classifications, Employees, and Supervisors for the Preparation of Position Descriptions, Standard Form No. 164)

If more space is required, use the other side and additional pages size 8 1/2 x 11 1/2. 16-4770-4 U. S. GOVERNMENT PRINTING OFFICE

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