

Government forms

POSITION DESCRIPTION

1. Check one: Dep't Field 2. Government quarters: _____

3. Reason for substitution: (a) If this position replaces another (i.e., a change of duties for an existing position), identify such position by title, allocation (service, series, grade), and position number. (b) Other (specify): _____

4. Army position No. _____

5. U. S. C. certificate No. _____

6. Date of certification: _____

7. Date received from C. S. C. _____

| ALLOCATION BY | CLASS TITLE OF POSITION | CLASS | | | |
|---|-------------------------|---------|--------|-------|---------|
| | | Service | Series | Grade | Special |
| a. Civil Service Commission | | | | | |
| b. Department, agency, or establishment | | | | | |
| c. Bureau | | | | | |
| d. Field office | | | | | |
| e. Recommended by holding office | | | | | |

8. Organizational title of position (if any): _____

9. Name of employee (if known, specify U.S., R.A., or D): _____

10. Department, agency, or establishment

11. First subdivision _____

12. Second subdivision _____

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

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

15. This is a complete and accurate description of the duties and responsibilities of the position. (Signature of immediate supervisor) _____ (Date) _____

16. Certification by department, agency, or establishment. (Signature) _____ (Date) _____

17. Description of duties and responsibilities (See Article to Position Classification, Employees, and Supervisors for the Preparation of Position Descriptions, Standard Form No. 104)

If more space is required, use the other side and additional pages also 1 x 10 1/2. 10-0700-4 U. S. GOVERNMENT PRINTING OFFICE

Description

Government forms for Bill Jewell, General Services Administration.

Date(s)

October 29, 1957

Accession Number

58-326-05

4x5 inches (10x13 cm) Black & White

Keywords Government paperwork

HST Keywords Charts - Bill Jewell; Jewell, Bill - Ref. to

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