

HANDOUT #2:
BLANK ALT OF-8 FORM

POSITION DESCRIPTION					Request#			1. Agency Position No.				
2. Reason for Submission <input type="checkbox"/> Redescription <input type="checkbox"/> New <input type="checkbox"/> Reestablishment <input type="checkbox"/> Other		3. Service <input type="checkbox"/> Hdqtrs <input type="checkbox"/> Field		4. Employing Office Location		5. Duty Station ★ Washington, DC, USA			6. OPM Certification No.			
				7. Fair Labor Standards Act <input type="checkbox"/> Exempt <input type="checkbox"/> Nonexempt		8. Financial Statements Required <input type="checkbox"/> Executive Personnel Financial Disclosure <input type="checkbox"/> Employment and Financial Interests			9. Subject to IA Action <input type="checkbox"/> Yes <input type="checkbox"/> No ★			
Explanation (Show any position replaced)		10. Position Status <input 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"/> Supervisor or Manager <input type="checkbox"/> Supervisor (CSRA) <input type="checkbox"/> Mgmt. Official (CSRA) <input type="checkbox"/> Leader <input type="checkbox"/> Team Leader <input type="checkbox"/> All Other		12. Sensitivity <input type="checkbox"/> 1-Non-Sensitive/Low Risk <input type="checkbox"/> 2-Non-Critical Sensitive <input type="checkbox"/> 3-Critical Sensitive <input type="checkbox"/> 4-Special Sensitive <input type="checkbox"/> 5-Moderate Risk Public Trust <input type="checkbox"/> 6-High Risk Public Trust Second Sensitivity Code <input type="checkbox"/> C-Computer ADP <input type="checkbox"/> N-Non-Computer		Security Clearance Level <input type="checkbox"/> 0-Not Applicable <input type="checkbox"/> 1-Confidential <input type="checkbox"/> 2-Secret <input type="checkbox"/> 3-Top Secret <input type="checkbox"/> 4-Top Secret/SCI <input type="checkbox"/> 5-Q Sensitive <input type="checkbox"/> 6-Q Nonsensitive <input type="checkbox"/> 7-L Atomic Energy <input type="checkbox"/> 8-Other Public Trust – Background Investigation			13. BU Code			
									14. Agency Use			
									Competitive Level Code:			
									<input type="checkbox"/> Physical Req. <input type="checkbox"/> Drug Test Req.			
									FPL			
15. Classified/Grade by		Official Title of Position		Pay Plan		Occupational Code		Grade		Initials Date		
a. U.S. Office of Personnel Management												
b. Department, Agency Or Establishment												
c. Second Level Review												
d. First Level Review												
16. Organizational Title of Position (if different from official title)					17. Name of Employee (if vacant, specify)							
18. Department, Agency, or Establishment ★					c. Third Subdivision							
a. First Subdivision					d. Fourth Subdivision							
b. Second Subdivision					e. Fifth Subdivision							
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 -Administrative Analysis Grade Evaluation Guide , TS-98 August 1990 -Management and Program Analysis Series, GS-0343 TS-98 August 1990						
Typed Name and Title of Official Taking Action						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 of 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				Date / /								
23. Position Review		Initials	Date		Initials	Date		Initials	Date		Initials	Date
a. Employee (optional)												
b. Supervisor												
c. Classifier												
24. Remarks												
25. Description of Major Duties and Responsibilities (See Attached)												