

NEW
 I/A: _____
 MR#: _____
 IP#: _____

CLASSIFICATION AND PERFORMANCE MANAGEMENT RECORD

• Performance Plan • Performance Appraisal • Performance Recognition • Progress Review • Position Description

Employee's Name: Recruit Social Security No.: _____
 Position Title: Management Analyst
 Pay Plan, Series, Grade/Step: GS-0343-11
 Organization: 1. NTIA 4. _____
 2. OPCM 5. _____
 3. _____ 6. _____
 Rating Period: _____
 Covered By: Senior Executive Service Other _____
 General Workforce _____

PART A—POSITION DESCRIPTION

POSITION CERTIFICATION—I certify that this is an accurate statement of the major duties and responsibilities of the position and its organization 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 violation of such statute or their implementing regulations.

SUPERVISOR'S SIGNATURE	DATE	SECOND LEVEL SUPERVISOR	DATE
Santa Claus	3/12/12	Bugs Bunny	3/12/12

CLASSIFICATION CERTIFICATION	OFFICIAL TITLE:					
	PP:	SERIES:	FUNC:	GRADE:	I/A: <input type="checkbox"/> YES <input type="checkbox"/> NO	

I certify that this position has been classified as required by Title 5, US Code, in conformance with standards published by the OPM or, if no published standard applies directly, consistently with the most applicable published standards.

NAME AND TITLE OF CLASSIFIER	SIGNATURE	DATE

PART B—PERFORMANCE PLAN

This plan is an accurate statement of the work that will be the basis of the employee's performance appraisal.

NAME AND TITLE OF FIRST LINE SUPERVISOR/RATING OFFICIAL	SIGNATURE	DATE

APPROVAL—I agree with the certification of the position description and approve the performance plan.

NAME AND TITLE OF APPROVING OFFICIAL OR SES APPOINTING AUTHORITY	SIGNATURE	DATE

EMPLOYEE ACKNOWLEDGEMENT —My signature acknowledges discussion of the position description and receipt of the plan, and does not necessarily signify agreement.	SIGNATURE	DATE

PRIVACY ACT STATEMENT—Disclosure of your social security number on this form is voluntary. The number is linked with your name in the official personnel records system to ensure unique identification of your records. The social security number will be used solely to ensure accurate entry of your performance rating into the automated record system.

MASTER RECORD/INDIVIDUAL POSITION DATA

A. KEY DATA					
1. FUNCTION (1) A/C/D/I/R	2. DEPT. CD/AGCY-BUR CD (4)	3. SON (4)	4. MR NO (6)	5. GRADE (2)	6. IP NO (8)

B. MASTER RECORD												
1. PAY PLAN (2)		2. OCC SER (4)		3. OCC FUNC CD (2)		4. OFF TLE-PF/CD/SF (6) PFIK TITLE CD SFIK			5. OFF TITLE (38) (32 W/ PF OR SF) (26 W/ PF AND SF)			
6. HQ/FLD CD (1) 1=HQ 2=FLD		7. SUPV CD (1) 1=SUPV SGE G 5=MGT CSRA 2=SUPV GSSG 6=LDR LGEG 3=MGR SGE G 8=ALL OTHERS 4=SUPV CSRA			8. CLASS STD CD (1) X=NEW STD BLANK=N/A		9. INTERDIS CD (1) N=NO Y=INTERDIS		10. DATE CLASS (6) MO DAY YEAR			
11. EARLY RET CD (1) 1=PRIMARY 3=FOREIGN SVC 2=SECONDARY BLANK=N/A			12. INACT/ACT (1) A=ACTIVE I=INACTIVE		13. DT ABOL (6) MO DAY YEAR			14. DT INACT/REACT (6) MO DAY YEAR			15. AGCY USE (10)	
16. INTERDIS SERIES (40) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4)												
17. INTERDIS-PF/CD/SF (50) (32 W/ PF OR SF) (26 W/ PF AND SF) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6)												

C. INDIVIDUAL POSITION												
1. FLSA (1) E=EXEMPT N=NONEXEMPT		PAY TBL (6)		2. FIN DS (1) 0 0=NONE 3=SF-278 4=SF-450		PROC INTG (1) Y=YES N=NO		3. POS SCHED (1) A=SCH A 0=EXCEPTED B=SCH B BUT NOT C=SCH C A,B,C		4. POS SENS (2) 1=LOW RISK C=ADP 2=NONCRIT/SENS N=NON-ADP 3=CRIT/SENS 4=SPECIAL SENS 5=MOD RISK 6=HIGH RISK		4A. DRUG TS (1)
6. WK TITLE CD (4)		7. WK TITLE (38) 2N										5. COMP LVL (4)
8. ORG STR CD (18) (1st) (2nd) (3rd) (4th) (5th) (6th) (7th) (8th)								9. VAC REV CD (1) 0=POSN ACTION NO VACANCY A=NO CHANGE B=LOWER GRADE C=HIGHER GRADE D=DIFFERENT TITLE AND/OR SERIES E=NEW POSN/NEW FTE				
10. TARGET GRADE (2) 14		11. LANG REQ (2)	12. PROJ DUTY IND (1) BLANK=N/A Y=YES		13. DUTY STATION (9) ST (2) CITY (4) CNTY (3) 11 0010 001			14. BUS CD (4)	15. DT LST AUDIT (6) MO DAY YEAR		16. PAS IND/LEO (1) BLANK=N/A 1=PAS A=LEO	17. DATE-EST (6) MO DAY YEAR
18. GRADE BASIS IND (1) 1=REV WHEN VACANT 4=SUP/PROGRAM 7=EQUIP DEV GUIDE 2=IMPACT OF PERSON 5=RGE G 3=SUP/GSSG 6=POLICY ANAL GEG						19. DT REQUEST RECD (6) MO DAY YEAR		20. NTE DATE (6) MO DAY YEAR		21. POS ST BUD (1) Y=PERM N=OTHER		
22. MAINT REV/CLASS ACT CD (2) (1ST DIGIT=ACTIVITY AND 2ND DIGIT=RESULTS)												
ACTIVITY 1=AUDIT (COUNTED TOWARDS MAINTENANCE REVIEW) 2=OTHER ACTIVITY				RESULTS 1=NO ACTION REQUIRED 4=TITLE CHANGE 7=POSN DOWNGRADE 2=MINOR PD CHANGE 5=SERIES CHANGE 8=NEW POSN 3=NEW PD REQUIRED 6=POSN UPGRADE 9=OTHER								
23. DATE EMP ASN (6) MO DAY YEAR		24. DATE ABOL (6) MO DAY YEAR		25. INACT/ACT (1) A=ACTIVE I=INACTIVE		26. DATE INACT/REACT (6) MO DAY YEAR		27. ACCTG STAT (4)	28. INTASGN SER (4)	29. AGENCY USE (8)		
30. PERSONNEL MANAGEMENT SPECIALIST'S SIGNATURE									31. DATE			
32. REMARKS												