

NOAA COMMISSIONED OFFICER BILLET DESCRIPTION

TO: DIRECTOR, COMMISSIONED PERSONNEL CENTER, CPC		FROM: ROUTING CODE: ADDRESS:	
THRU (Liaison Officer):		PHONE NUMBER:	
BILLET TITLE:	BILLET #: _____		
RANK REQUESTED: (0-2, 0-3, 0-4, etc.) _____	(This block to be completed by liaison officer)		
GS/GM EQUIVALENT: _____	IS THIS A NEW BILLET: YES NO	BILLET PRIORITY: A, B, C, R	
IMMEDIATE SUPERVISOR:	TITLE:	PHONE NUMBER:	
EDUCATIONAL REQUIREMENTS:			
OTHER QUALIFICATIONS (INCLUDE PARTICULAR SECURITY CLEARANCES, SKILLS, ETC...)			
1. GENERAL DESCRIPTION OF BILLET:			
2. DUTIES AND RESPONSIBILITIES: a. Is this a supervisory billet? YES NO b. If so, state number and grade of personnel supervised. Number: _____ Grade(s): _____			

3. CAREER DEVELOPMENT OPPORTUNITIES:

4. ADDITIONAL COMMENTS:

SIGNATURE OF SUPERVISOR:

DATE: