

NOAA COMMISSIONED OFFICER BILLET DESCRIPTION

SECTION 1 - GENERAL INFORMATION

A. Billet Number	<input type="text"/>	B. Billet Title	<input type="text"/>
C. Grade Requested	<input type="text"/>	D. Type of Submission	<input type="text"/>
E. Minimum amount of overlap between incumbent officer/reporting officer for continuity of duties	<input type="text"/>		
F. Duty Type	<input type="text"/>	G. Estimated Length of Assignment	<input type="text"/>

SECTION 2 - DUTY STATION ADDRESS AND CONTACT INFORMATION

A. Street Address	<input type="text"/>	B. Street Address	<input type="text"/>				
C. City	<input type="text"/>	D. State	<input type="text"/>	E. Country	<input type="text"/>	F. Zip Code	<input type="text"/>
G. Office	<input type="text"/>	x	<input type="text"/>	H. Mobile	<input type="text"/>	I. Fax	<input type="text"/>

SECTION 3 - OFFICER EVALUATION REPORTING

A. Supervisor							
1. Name	<input type="text"/>	2. Position	<input type="text"/>	3. Grade	<input type="text"/>		
4. Email	<input type="text"/>	5. Office	<input type="text"/>	x	<input type="text"/>	6. Mobile	<input type="text"/>
B. Reporting Officer (2nd Level Supervisor)							
1. Name	<input type="text"/>	2. Position	<input type="text"/>	3. Grade	<input type="text"/>		
4. Email	<input type="text"/>	5. Office	<input type="text"/>	x	<input type="text"/>	6. Mobile	<input type="text"/>
C. Reviewer (Normally the Reporting Officer's Supervisor)							
1. Name	<input type="text"/>	2. Position	<input type="text"/>	3. Grade	<input type="text"/>		
4. Email	<input type="text"/>	5. Office	<input type="text"/>	x	<input type="text"/>	6. Mobile	<input type="text"/>

SECTION 4 - ACCOUNTING AND ORGANIZATION

Complete as many of the following fields as possible. If in doubt, leave the field blank

A. Organizational Hierarchy - Use common acronyms when possible.

1. Staff or Line Office	<input type="text"/>	2. Office, Center, or Lab	<input type="text"/>		
3. Division	<input type="text"/>	4. Branch	<input type="text"/>	5. Section or Team	<input type="text"/>
B. NOAA Goal/Subgoal	<input type="text"/>	C. Program	<input type="text"/>		
D. NOAA Org Code	<input type="text"/>	E. NFC Org Code	<input type="text"/>	F. Project-Task	<input type="text"/>

SECTION 5 - PROGRAM, PROJECT OR ACTIVITY OVERVIEW

SECTION 6 - DUTIES AND RESPONSIBILITIES

6A. Description of Duties and Responsibilities

6B. Division of Duties and Responsibilities, Total Must = 100%

Technical + Operational + Leading and Managing + Executive Leadership = 100%

SECTION 6 - DUTIES AND RESPONSIBILITIES (continued)**6C. Resources Managed****1. Human**

Does the Officer supervise personnel?

☐

Yes

☐

No

Number of personnel supervised

Grades of supervised personnel

Will the Officer lead people, but has no supervisory responsibilities?

☐

Yes

☐

No

Number of personnel led

Grades of personnel led

2. Fiscal

Will the Officer have budget responsibility?

Dollar Amount (K)

3. Assets - Will the Officer be directly responsible for managing Government assets such as ships, aircraft, boats, etc? If so, list the asset(s) below in terms of physical description and when known, replacement value (indicate if estimated):

SECTION 7 - LEADERSHIP PREREQUISITES

GRADE	LEADERSHIP MATURITY LEVEL	LEADERSHIP COMPETENCIES NEEDED FOR THIS BILLET
ENS (O1)	Leading Self	<input type="checkbox"/> Core Values & Conduct <input type="checkbox"/> Health & Well Being <input type="checkbox"/> Responsibility <input type="checkbox"/> Followership <input type="checkbox"/> Adaptability
LTJG (O2)		<input type="checkbox"/> Interpersonal Skills <input type="checkbox"/> Continuous Learning <input type="checkbox"/> Technical Proficiency <input type="checkbox"/> Listening <input type="checkbox"/> Speaking
LT (O3)	Leading Others	<input type="checkbox"/> Writing <input type="checkbox"/> Team Building <input type="checkbox"/> Leveraging Diversity <input type="checkbox"/> Influencing Others <input type="checkbox"/> Developing Others <input type="checkbox"/> Execution
LCDR (O4)		<input type="checkbox"/> Decisiveness <input type="checkbox"/> Problem Solving <input type="checkbox"/> Conflict Management <input type="checkbox"/> Customer Focus <input type="checkbox"/> Entrepreneurship
CDR (O5)	Leading Performance and Change	<input type="checkbox"/> Creativity & Innovation <input type="checkbox"/> Human Capital Management <input type="checkbox"/> Financial Management <input type="checkbox"/> Technology Management
CAPT (O6) and RADM (O7/O8)		<input type="checkbox"/> External Awareness <input type="checkbox"/> Strategic Thinking <input type="checkbox"/> Political Savvy <input type="checkbox"/> Vision <input type="checkbox"/> Partnering

Leadership Prerequisite Comments (Optional)

SECTION 8 - OPERATIONAL PREREQUISITES

A. Marine Prerequisites

☐ Officer of the Deck ☐ Senior Watch Officer ☐ ECDIS ☐ Dynamic Positioning ☐ Boat Deployment ☐ MedPIC

☐ Coxswain/OIC ☐ HAZWOPER ☐ AUV Deployment ☐ U/W UAS Deployment ☐ Buoy/Mooring Qualified

☐ Trawl Qualified ☐ Longline Qualified ☐ Hydro Launch PIC ☐ Foreign Port Calls

B. Aviation Prerequisites

☐ Co-Pilot ☐ Pilot ☐ Aircraft Commander ☐ Mission Commander ☐ Instructor Pilot ☐ Hurricane Qualified

☐ Alaska/Wilderness Qualified ☐ Flight Meteorologist ☐ International Flights ☐ UAS Pilot

C. Dive Prerequisites

☐ Scientific Diver ☐ Working Diver ☐ Advanced Working Diver ☐ Master Diver ☐ Dive Master ☐ Dive Medic

☐ Unit Diving Supervisor

D. Additional Operational Prerequisites (security clearances, special training) and Operational Prerequisite Comments (Optional)

SECTION 9 - PROGRAM, PROJECT, OR ACTIVITY PREREQUISITES

List specific qualifications, knowledge, skills or abilities required prior to reporting to this billet. For example: budget (MARS, CBS); personnel; contracting (COTR, Warrants); Scientific (IHO Cateogry A, scientific papers/publications, GIS); engineering (marine survey, ABYC, ABS, FAA); regulatory (US Code, CFR); information technology (databases, networks, programming).

SECTION 10 - LEADERSHIP DEVELOPMENT

GRADE	LEADERSHIP MATURITY LEVEL	LEADERSHIP COMPETENCIES DEVELOPED IN THIS BILLET
ENS (O1)	Leading Self	<input type="checkbox"/> Core Values & Conduct <input type="checkbox"/> Health & Well Being <input type="checkbox"/> Responsibility <input type="checkbox"/> Followership <input type="checkbox"/> Adaptability
LTJG (O2)		<input type="checkbox"/> Interpersonal Skills <input type="checkbox"/> Continuous Learning <input type="checkbox"/> Technical Proficiency <input type="checkbox"/> Listening <input type="checkbox"/> Speaking
LT (O3)	Leading Others	<input type="checkbox"/> Writing <input type="checkbox"/> Team Building <input type="checkbox"/> Leveraging Diversity <input type="checkbox"/> Influencing Others <input type="checkbox"/> Developing Others <input type="checkbox"/> Execution
LCDR (O4)		<input type="checkbox"/> Decisiveness <input type="checkbox"/> Problem Solving <input type="checkbox"/> Conflict Management <input type="checkbox"/> Customer Focus <input type="checkbox"/> Entrepreneurship
CDR (O5)	Leading Performance and Change	<input type="checkbox"/> Creativity & Innovation <input type="checkbox"/> Human Capital Management <input type="checkbox"/> Financial Management <input type="checkbox"/> Technology Management
CAPT (O6) and RADM (O7/O8)		<input type="checkbox"/> External Awareness <input type="checkbox"/> Strategic Thinking <input type="checkbox"/> Political Savvy <input type="checkbox"/> Vision <input type="checkbox"/> Partnering
Leadership Development Comments (Optional)		

SECTION 11 - OPERATIONAL DEVELOPMENT

A. Marine Development	
<input type="checkbox"/> Officer of the Deck <input type="checkbox"/> Senior Watch Officer <input type="checkbox"/> ECDIS <input type="checkbox"/> Dynamic Positioning <input type="checkbox"/> Boat Deployment <input type="checkbox"/> MedPIC <input type="checkbox"/> Coxswain/OIC <input type="checkbox"/> HAZWOPER <input type="checkbox"/> AUV Deployment <input type="checkbox"/> U/W UAS Deployment <input type="checkbox"/> Buoy/Mooring Qualified <input type="checkbox"/> Trawl Qualified <input type="checkbox"/> Longline Qualified <input type="checkbox"/> Hydro Launch PIC <input type="checkbox"/> Foreign Port Calls	
B. Aviation Development	
<input type="checkbox"/> Co-Pilot <input type="checkbox"/> Pilot <input type="checkbox"/> Aircraft Commander <input type="checkbox"/> Mission Commander <input type="checkbox"/> Instructor Pilot <input type="checkbox"/> Hurricane Qualified <input type="checkbox"/> Alaska/Wilderness Qualified <input type="checkbox"/> Flight Meteorologist <input type="checkbox"/> International Flights <input type="checkbox"/> UAS Pilot	
C. Dive Development	
<input type="checkbox"/> Scientific Diver <input type="checkbox"/> Working Diver <input type="checkbox"/> Advanced Working Diver <input type="checkbox"/> Master Diver <input type="checkbox"/> Dive Master <input type="checkbox"/> Dive Medic <input type="checkbox"/> Unit Diving Supervisor	
D. Additional Operational Development (security clearances, special training) or Operational Development Comments (Optional)	

SECTION 12 - PROGRAM, PROJECT, OR ACTIVITY DEVELOPMENT

List specific qualifications, knowledge, skills or abilities to be developed in this billet. For example: budget (MARS, CBS); personnel; contracting (COTR, Warrants); Scientific (IHO Category A, scientific papers/publications, GIS); engineering (marine survey, ABYC, ABS, FAA); regulatory (US Code, CFR); information technology (databases, networks, programming).

SECTION 13 - CRITICAL SUCCESS CRITERIA

Provide brief measurable performance goals which would represent successful performance in this billet.

SECTION 14 - ROUTING, REVIEW, RECOMMENDATION AND APPROVAL

A. Developer's Statement

"I certify that I have written this billet description and certify that it is a true and correct representation of the billet."

1. Signature _____

2. Date

3. Name

4. Title/Position

B. Supervisor's Statement

"I have reviewed this billet description and certify that it is a true and correct representation of this billet "

1. Signature _____

2. Date

3. Name

4. Title/Position

C. Reviewing Officer's Statement

"I have reviewed this billet description and certify that this billet is a priority for my Line, Staff, or Headquarters Office."

1. Signature _____

2. Date

3. Name

4. Title/Position

D. Commissioned Personnel Center Endorsement

"I am the OMAO/CPC Officer Career Management Division representative. I recommend _____ of this billet."

1. Signature _____

2. Date

3. Name

4. Title/Position

D. Director, NOAA Corps Endorsement

"I am the _____ and I _____ this billet."

1. Signature _____

2. Date

3. Name

4. Title/Position