NOAA	Form	56-28A
(8-94)		

U.S. DEPARTMENT OF COMMERCE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION

NOAA COMMISS	MONED OF	-FICER BILLET D	ESCRIPTION	
TO: DIRECTOR, COMMISSIONED PERSONNEL CENTER, CPC		FROM: ROUTING CODE: ADDRESS:		
THRU (Liaison Officer):				
BILLET TITLE: BILLET #:		PHONE NUMBER:		
RANK REQUESTED: (0-2. 0-3, 0-4, etc.)		(This block to be completed by		
GS/GM EQUIVALENT:		IS THIS A NEW BILLET: BILLET PRIORITY: A,	YES NO B, C, R	
IMMEDIATE SUPERVISOR:	TITLE:		PHONE NUMBER:	
EDUCATIONAL REQUIREMENTS:				
OTHER QUALIFICATIONS (INCLUDE PARTICULAR SECURITY CLEARANCES, SKILLS, ETC)				
1. GENERAL DESCRIPTION OF BILLET:				
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: