

POSITION DESCRIPTION (Please Read Instructions on the Back)

1. Agency Position No.
663-2007-0

2. Reason for Submission <input checked="" type="checkbox"/> Redescription <input type="checkbox"/> Reestablishment <input type="checkbox"/> New <input type="checkbox"/> Other <small>Explanation (Show any positions replaced)</small>		3. Service <input type="checkbox"/> Dept'l <input type="checkbox"/> Field		4. Employing Office Location Seattle, WA		5. Duty Station VAMC		6. CSC Certification No.	
Electronics Technician GS-856-10 dtd. 5/27/81 #5261-2007-0				7. Fair Labor Standards Act <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Nonexempt		8. Employment/Financial Stmt Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		9. Subject to IA Action <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10. Position Status <input checked="" type="checkbox"/> Competitive <input type="checkbox"/> Excepted (Specify)				11. Position is <input type="checkbox"/> Supervisory <input type="checkbox"/> Managerial <input checked="" type="checkbox"/> Neither		12. Sensitivity <input type="checkbox"/> Critical <input type="checkbox"/> Noncritical <input checked="" type="checkbox"/> Nonsensitive		13. Competitive Level Code	
14. Agency Use									

15. Classified/Graded by	Official Title of Position	Pay Plan	Occupational Code	Grade	Initials	Date
a. Civil Service Commission						
b. Department, Agency, or Establishment						
c. Bureau	BIOMEDICAL ENGINEERING TECHNICIAN	GS	8020	11	[Signature]	12/02/88
d. Field Office	Biomedical Engineering Technician	GS	802	11		
e. Recommended by Supervisor or Initiating Office	Biomedical Engineering Technician	GS	802	11	[Signature]	

16. Organizational Title of Position (if different from official title) _____
 17. Name of Employee (if vacancy, specify) **Wiley**

18. Department, Agency, or Establishment Veterans Administration		c. Third Subdivision Anesthesia and OR Service	
a. First Subdivision Medical Center		d. Fourth Subdivision	
b. Second Subdivision Professional Services		e. Fifth Subdivision	

19. Employee Review. This is an accurate description of the major duties and responsibilities of my position _____
 Signature of Employee (optional) _____

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 Peter R. Freund, M.D.		b. Typed Name and Title of Highest Level Supervisor (if optional) Peter R. Freund, M.D.	
Signature [Signature]	Date _____	Signature [Signature]	Date 11/15/88
Chief, Anesthesia & OR Service		Chief, Anesthesia & OR Service	

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 Civil Service Commission or, if no published standards apply directly, consistently with the most applicable published standards.
 Typed Name and Title of Official Taking Action
John H. Rine Jr, Pers. Mgt. Spec

Signature: **[Signature]**
 Date: **12/02/88**

22. Standards Used in Classifying/Grading Position
705, GS-802, dtd 8/24

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 or the Civil Service Commission. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the Commission.

23. Position Review	Initials	Date								
a. Employee (optional)										
b. Supervisor										
c. Classifier										

24. Remarks _____

25. Description of Major Duties and Responsibilities (see attached)