JOB ANALYSIS FORM	ORGANIZATION		JOB NO.	PAGE NO.	NO. OF PAGES

POSITION TITLE | AGENCY PERSONNEL SPECIALIST *(Telephone number)*

SERIES, GRADE | SUBJECT MATTER EXPERT *(Typed name and extension)*

JOB ACTIVITY a	KNOWLEDGE, SKILLS AND ABILITIES *(KSA's)** b	RELATIVE IMPOR-TANCE OR WEIGHT** c	EVIDENCE OF KSA d

*Identify mandatory KSA's with symbol (M).   ****Most Important = 1; Important = 2, Least Important = 3.**

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