CLASSIFICATION INFORMATION SHEET
Completing Job Facts Information Data Elements for Coversheet

FOR OPERATIONAL USE ONLY

7 AUG 2020

This information sheet will assist in completing the necessary data elements found on the **Job Facts Information** screen in the Avue Position Classification and Management (PCM) Module. For questions, please email HROM classification at: **smb_hqmc_arh_class@usmc.mil**.

FIELD	ACTION TO TAKE
POSITION FILE NAME	
Position File Name:	Complete test field with name of file.
PD Number:	Leave Blank (will be completed by HROM Classification Advisor).
Document Status:	Leave as "Working"
SUBMITTED AS	
Reason for Submission:	Select from Drop-Down.
Explanation (show any positons replaced):	Provided PD# and title of "Legacy/Old" PD.
Purpose and Role of Your Position (Introductory Statement):	Paragraph must contain, (1) where position is located within the organization; (2) to whom the position reports; (3) the purpose of the position; and (4) the mission of the organization.
Work Reserved for Federal Government Employees:	Not required
Organizational Level:	Select from Drop-Down
Service Type:	Select from Drop-Down
Computer Job:	Select from Drop-Down
Level of Access:	Not required
Subject to IA Action:	Type "Yes" or "No" in text field.
ORGANIZATIONAL LOCATION	
Organizational Title of the Position (if different from official title):	Complete as appropriate.
Organization Code:	Enter UIC
Department, Agency, or Establishment:	Complete as appropriate.
Agency Use:	Leave Blank
First Subdivision, Second Subdivision, Third Subdivision, etc.:	Completed as appropriate.
GEOGRAPHIC LOCATION	
Duty Station:	Complete text field with appropriate City, State (e.g. Quantico, VA) or "VARIOUS" if multiple duty stations.
Employing Office Location:	Complete text field with appropriate City, State (e.g. Arlington, VA)
REPORTING RELATIONSHIPS	
Name and Title of Competency/Community Manager:	Leave Blank (**used only** for SYSCOM)
Name and Title of Immediate Supervisor:	Signed by immediate supervisor (1st Level Supervisor)
Name and Title of Higher-Level Supervisor:	Signed by second level supervisor.
Name and Title of Performance Appraisal Rater:	Not Required.
Name and Title of Performance Appraisal Reviewer:	Not Required.
Name of Employee (if vacant, specify):	Not Required.

REFERENCE INFORMATION	
Position Sensitivity and Risk:	Select from Drop-Down (must match PDR determination).
ADDITIONAL INFORMATION	
Type of Background Investigation:	Must match PDR
Manager Level:	Select from Drop-Down
Security Clearance Required:	Select from Drop-Down. Must match PDR.
FM Certification:	If required, select from Drop-Down
Available For Telework	Select from Drop-Down.
Business Unit:	Leave blank
Type of Appointment:	Leave blank
Drug Testing Designated Position:	Check box if required.
Medical Testing Indicator:	Leave blank
Legacy Cyber Security Code:	Not Required.
PCA:	Leave blank
Physical Exam Required:	Check box if required.
Select Agent Access:	Leave blank
Commissioned Corps:	Leave blank
Limited Term:	Leave blank
Limited Emergency:	Leave blank
NTE Date:	Leave blank
DAWIA INFORMATION	**Complete only if Position is designated DAWIA**
Acquisition Career Field:	Select from Drop-Down.
Acquisition Certification Level:	Select from Drop-Down.
Critical Acquisition Position (CAP) DD-2888 Required:	Check box if required.
Key Leadership Position (KLP) DD-2889 Required:	Check box if required.
ACQUISITION DEMO INFORMATION	
51% or more Direct Acquisition Support:	Check box if criteria is met.
Competency:	Select from Drop-Down.
Community:	Select from Drop-Down.
Additional Org:	Select from Drop-Down.
Supervisory Status:	Select from Drop-Down.

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