

**FORM A: JOB CLASSIFICATION AND INCUMBENTS FORM**

Occupational Category (CIRCLE ONE)\* MGRS PROF TECH SAL CLER SERV FARM CRFT OPER LABR

Total number of incumbents in this category

CONTRACTOR NAME \_\_\_\_\_

FACILITY LOCATION: \_\_\_\_\_

(1) Company Job Title	(2) Company Job No.	(3) Census Code**	(4) Job Group Assignment for this occupational category					(5) Total in Title	MALES					FEMALES						
									(6) W(non-Hisp)	(7) B(non-Hisp)	(8) Hisp	(9) Asian	(10) Nat Amer	(11) W(non-Hisp)	(12) B(non-Hisp)	(13) Hisp	(14) Asian	(15) Nat Amer		
			1	2	3	4	5													

\*Please include on each sheet, information concerning only 1 occupational category.  
 \*\*See listing of occupational categories.

**NOTE:** Make as many copies of this form as you require for each occupational category.





