U.S. OPM Form opm-opm-1079-a

Attachment 2

U.S. Office of Personnel Management

Form Approved:
O.M.B. No. 3206-0127

Interagency Report
Control No. 1048-OPM-XX

Biennial Survey on Occupations of Federal Civilian Employees
Distribution of Paid Full-Time Employees by Occupation

1. Department or Agency Code	(cc 1-2)	2. Bureau or Agency Subelement Code	(cc 3-4)

3. Location Code (cc 5-13)

☐ Washington, D.C. ☐ Other _____

4. Pay Plan Code (cc 14-15)	5. Pay Grade* (cc 16-17)	6. Salary* (cc 18-23)	7. Occupational Code (cc 24-27)	8. Supervisory or Non-Supervisory Indicator (cc 28)	9. Total Men (cc 29-33)	10. Total Women (cc 34-38)	11. Total (cc 39-43)

*Fill in number 5 or 6 for each item, but not both.

FORM TO BE LOCALLY REPRODUCED

OPM Form 1079-A (Rev. 9/89)
Previous editions obsolete