

A. PERSONNEL Continued . . .

a) Nonsupervisory Responsibilities	b) No. X Months	c) Avg. Hrs. Per Mo.	Total Hrs. (bxc)
4. _____			
5. _____			
6. _____			

b) Supervisory Human Resources Responsibilities	b) No. X Months	c) Avg. Hrs. Per Mo.	Total Hrs. (bxc)
7. _____			
8. _____			

**Total Personnel Hours
6-A-9** _____

B. NONPERSONNEL

a) Other Responsibilities	b) No. X Months	c) Avg. Hrs. Per Mo.	Total Hrs. (bxc)
1. _____			
2. _____			
3. _____			
4. _____			

**Total Other Hours
6-B-7** _____

C. PERSONNEL/NON-PERSONNEL RATIO

1. Enter total of all hours from Section 6-A-9 and Section 6-B-7 above _____
 2. Enter total hours from Section 5 _____
- If line C-1 and line C-2 are different, correct the hours in Sections 6-A and 6-B or attach explanation for difference.*
3.
 - a) Enter hours from section 6-A-9 here _____
 - b) Enter hours from Section 5 here _____
 - c) Divide line C-3-a by line C-3-b and enter result here _____

I understand that any willful misrepresentation of my work or educational experience may result in removal from the certification program and revocation of certification if it has already been granted.

Applicant Signature: _____ Date _____

REMEMBER THE DEADLINE IS FEBRUARY 15 OF EACH YEAR

Mail to:
KPHRA Certification Program
 Institute of Government
 203 Miller Hall
 Eastern Kentucky University
 521 Lancaster Avenue
 Richmond, KY 40475-3102

**HAVE YOU ATTACHED
 A COPY OF YOUR JOB
 DESCRIPTION?**

Rcd: _____

Appr: _____

FOR OFFICE USE ONLY

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