

DoD 8140 Experience Evaluation Worksheet

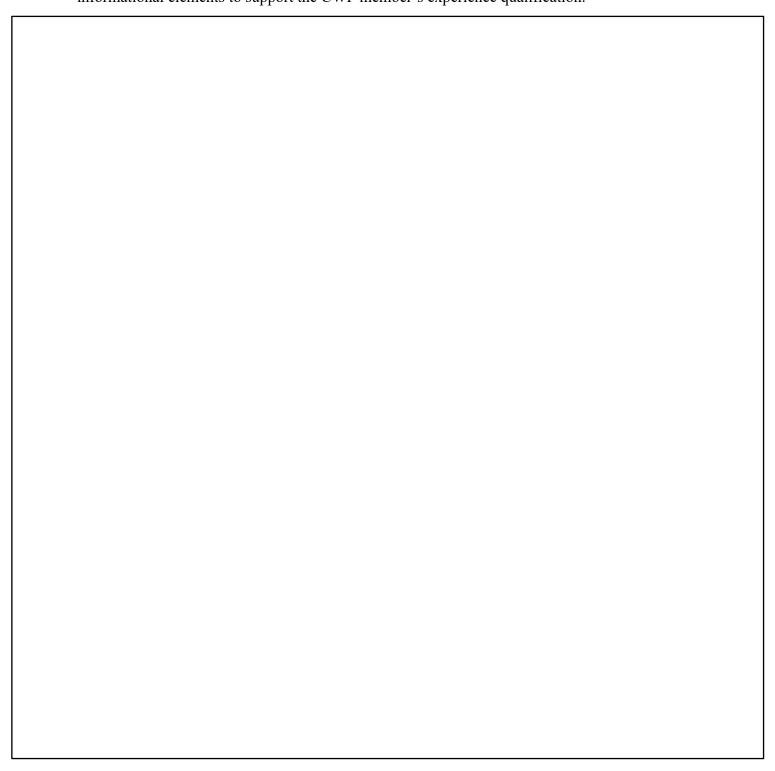
Part I: Instructions for DoD Cyber Workforce Program Managers: Please fill out the below fields to nominate a DoD cyber workforce member (CWF) to a DoD 8140 Experience Evaluation Board.

CWF Member Name			
Grade			
Occupational Series			
Title			
Position Description			
BIN			
Billet DCWF Work Role			
Billet DoD 8140 Proficiency Level			
Start Date in DoD Cyber Workforce			
Time in Current Position (in years & months)			
Time in Organization (in years & months)			
CWF Supervisor Name			



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Part II: Instructions for DoD Cyber Workforce Program Managers: Please list all applicable informational elements to support the CWF member's experience qualification.





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meet 70% of core task and kn	D Cyber Workforce Program Manager nowledge, skills, and abilities (KSAs) e ptions? CWF members must demonstra VF work role. (Y/N)	established in the DoD 8140
Experience Evaluation Board	D Cyber Workforce Program Manager d concur or non-concur that the CWF no 8140 foundational qualification using th DoDM 8140.03? (Y/N)	nember evaluated during
Part V: Please provide signa	tures of DoD 8140 Experience Evaluat	ion Board participants below.
Board Title:	Board Title:	Board Title:
Board Title:	Board Title:	Board Title: