WORKLOAD FACTOR/MAN-HOUR COLLECTION

For use of this form, see AR 570-5; the proponent agency is DCSPER

REQUIREMENT CONTROL SYMBOL
CSGPA-1723

SECTION I - HEADER INFORMATION

1. MACOM	2. INSTALLATION/UIC	3. TITLE OF STANDARD

4. AFD CODE/WORK CENTER TITLE	5. TDA CCNUM/EDATE/PARA (Use last approved TDA)	6. REPORTING PERIOD

SECTION II - WORKLOAD FACTOR/MAN-HOUR DATA

7. WORKLOAD FACTOR TITLE(s)	8. SOURCE OF COUNT	9. EXCEPTION TYPE
X_1	X_1	☐ ADDITIVE
X_2	X_2	☐ EXCLUSION
X_3	X_3	☐ DEVIATION

10. MONTH/YEAR	11. WORKLOAD FACTOR/MAN-HOUR DATA		
	X_1 WLF TITLE	X_2 WLF TITLE	X_3 WLF TITLE
12. TOTALS			
13. MONTHLY AVERAGE			

14. REMARKS

15. SIGNATURES		
a. SIGNATURE OF FUNCTIONAL PROPONENT ☐ CONCUR ☐ NONCONCUR	b. SIGNATURE OF INSTALLATION MANPOWER OFFICER ☐ CONCUR ☐ NONCONCUR	c. SIGNATURE OF MACOM MANPOWER OFFICER ☐ CONCUR ☐ NONCONCUR
DATE	DATE	DATE
TITLE AND PHONE NUMBER OF FUNCTIONAL PROPONENT	TITLE AND PHONE NUMBER OF INSTALLATION MANPOWER OFFICER	TITLE AND PHONE NUMBER OF MACOM MANPOWER OFFICER