
CANDIDATE PMEF NARRATIVE SHEET

Department/Agency: [insert name]

Priority Mission Essential Function (PMEF): #[insert PMEF #]
[insert name and brief description of PMEF]

Descriptive Narrative: [insert descriptive narrative explaining the PMEF and relationship to the NEF]

Implications if Not Conducted: [briefly explain the effect if the PMEF is not conducted]

Associated National Essential Function(s) (NEF): [list NEFs that the PMEF supports]

Other Comments: [insert any additional comments]

Timing: [indicated the timing it can be delayed]

Partners: [indicate all Departments and Agencies or other Federal or Private partners that reliant upon the PMEF]

Point of Contact:

Name: [insert name]

Email: [insert e-mail]

Phone: [insert phone number]