RECOMMENDATION OF EVALUATION PANEL

INSTRUCTIO	NS: The Evaluation P	anel is res _l	oonsible for forv	varding t	he complete	d form to the Training
· · · · · · · · · · · · · · · · · · ·	ppropriate action. For p			_		-
	uld accompany this for		-			
	rough the Training Offic			-		n or Regional Personnel
	ecessary action and filir			Personnel		
Trainee's Name Curre		Current Posit	current Position, Grade		Organization, Location	
EVALU	JATION PANEL STATEMENT	AND RECON	MENDATION (Ente	r GSA Orde	er number and o	check appropriate box)
attest that w	ned the evidence deve	contents of	the GSA Order	and/or tr	aining and de	GSA Orderevelopment program, and ion to his/her Individual
By examinati	on of the trainee, and/o	•	•			has come in contact on trainee has achieved an
	□ b	e promoted	I to the next app	ropriate (grade.	
be assigned to the target positon.						
	□ ¹	e assigned	to the target po	SILUII.		
PANEL MEMBERS SIGNATURE				TITLE		DATE
1.						
2.						
 .						
2						
3.						
4.						
5.						
Training Officer Verification	I verify that the requirements of the training program referred to above which are applicable to this trainee were met.					
	Signature				D	ate