

ADS Mandatory Reference: 454
ADS Supplementary Reference: N/A

SPECIFIC RIF NOTICE

Name: _____ Date _____
Address: _____

Dear Ms./Mr. _____

I regret to inform you that your name has been reached for reduction in force action. The reduction in force is necessary due to _____ (e.g., **lack of funds**) - refer to Agency's RIF Announcement _____. The retention rights of all employees have been carefully checked. The following is provided for your information and use as appropriate.

Retention Preference Information

Competitive Area: _____ Worldwide
Tenure Group and Subgroup: _____
Service Category: _____ FS/SFS
Salary Class (**Grade**): _____
Primary Skill Code: _____

RETENTION FACTOR POINTS

Veterans Preference Points _____
Performance: _____
 Selection Board Grades: _____
 Promotion _____
 Awards _____
USAID Hardship Service Points: _____
USAID Language Proficiency Points: _____
USAID Overseas Service Points: _____
US Government Service Points: _____

TOTAL POINTS _____

You have been reached for release from your Competitive Level in accordance with RIF Policy in Chapter 454 and Essential Procedures E454. You will be separated effective _____. You may resign at any time after receipt of this notice. In such case, the customary advance notice for resignation will be waived. Your resignation may be effective on the date you specify or on the separation date specified in the notice, whichever is earlier.

If you are eligible for voluntary retirement under Section 811 of the Foreign Assistant Act, or are in Class 1 or the Senior Foreign Service, and you choose to retire, you shall receive benefits under Section 806. The effective date of retirement will be the effective date of separation specified in this reduction in force notice, or earlier if you so select.

If you are not eligible for retirement as stated above, you shall receive severance pay. A computation of your entitled amount and the conditions of payment are enclosed.

Annual leave to your credit will be paid in a lump sum. Your travel entitlement(s) are outlined in Enclosure _____.

Information regarding applicable reemployment rights, the Agency and OPM's outplacement program, continuation or conversion of health benefits enrollment and life insurance coverage, and unemployment compensation is enclosed for your reference.

(Name, Organization, Location, and Telephone) is available to assist you by explaining this proposed action, including your right to review, with or without a designated representative, pertinent directives, RIF registers, and other materials related to this action. If after examination of the register and pertinent directives you believe your rights have been violated, you have the right to appeal the action to the Merit Systems Protection Board or grieve under 3 FAM 4400, Foreign Service Grievance System. Addresses and filing time requirements for each are as follows:

Deputy Assistant Administrator for Human Resources
Room ____, SA-36
Washington D.C. 20523

Grievances filed under 3 FAM 4400 shall be limited to cases of reprisal, interference in the conduct of an employee's official duties, or inappropriate use of RIF authority by the Agency. Such grievances are initiated at the Agency level with the DAA/M/HR and must be submitted within 3 years after the effective date of the Reduction-in-Force. The filing of a grievance does not change the effective date of the action proposed in this notice.

Merit Systems Protection Board
5203 Leesburg Pike, Falls Church, VA. 22041

File with the Merit Systems Protection Board in writing anytime during the 30 day period beginning with the day after the effective date of the reduction-in-force action. A copy of the MSPB regulation and MSPB appeal form is enclosed.

The services you have rendered toward the accomplishment of our mission are sincerely appreciated. I regret that the ____ (**repeat reason/s necessitating RIF**) ____ made this action necessary.

Enclosures: **(list each separately)**

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