

CAUTION:

**IF YOU ARE USING A PUBLIC ACCESS
COMPUTER, (I.E., PUBLIC LIBRARY, ETC.)
BE CERTAIN YOU DRAG THIS FORM TO THE TRASH CAN
AND EMPTY THE TRASH WHEN FINISHED.**

**THIS WILL PREVENT UNAUTHORIZED
ACCESS TO PERSONAL INFORMATION SUCH AS
YOUR NAME, HOME ADDRESS, AND
SOCIAL SECURITY NUMBER.**



AGENCY CERTIFICATION OF REASSIGNMENT AND ACCOMMODATION EFFORTS
In Connection With Disability Under the Federal Employees' Retirement System

Form Approved
OMB No. 3206-0171

To be completed by Coordinator for Employment of the Handicapped or other authorized agency official. See instructions on back of form.

1. Name of Applicant (Last, first, middle) | 2. Date of Birth (mo., day, yr.) | 3. Social Security Number

4. Has reasonable effort for accommodation been made?
[] No, accommodation is not an option. (Specify in the space below the functional/environmental factors related to the employee's inability to perform fully successfully and explain why accommodation is not possible.
[] No, accommodation is not appropriate. Medical information presented to agency does not document a disabling medical condition.
[] Yes. Describe below accommodation efforts and attach supporting documentation.

5. Results of agency reassignment efforts (Check one of the following statements)
[] Reassignment is not necessary because employee's service is fully successful and there are no medical restrictions from performing critical duties or from attending work altogether.
[] The employee declined reassignment to the vacant position(s) in this agency at the same grade or pay level and tenure, within the same commuting area for which employee meets minimum qualifications.
[] The employee was not reassigned to any vacant position in this agency at the same grade or pay level and tenure, within the same commuting area for which employee meets minimum qualifications. The position(s) identified and reason(s) for non-assignment are shown below.

CERTIFICATION BY COORDINATOR FOR EMPLOYMENT OF THE HANDICAPPED OR OTHER AUTHORIZED AGENCY OFFICIAL:
I CERTIFY that this statement is true to the best of my knowledge and belief.

8. Signature of Responsible Agency Official | 9. Date | 10. Telephone Number (Including area code)
11. Typed Name of Responsible Agency Official | 12. Title of Responsible Agency Official

GUIDELINES FOR COORDINATOR FOR EMPLOYMENT OF THE HANDICAPPED

GENERAL INFORMATION

Disability retirement determinations are made in accordance with FERS disability retirement regulations (5 CFR 844). A finding of entitlement to disability retirement benefits is made only when the information submitted with the application shows that an employee is unable to render useful and efficient service because of disease or injury in the employee's current position, and that the employee has not declined an offer of reassignment to a vacant position in the same agency and commuting area at the same grade or pay level and tenure for which the employee is qualified for reassignment. Useful and efficient service means fully successful performance of the critical or essential elements of the position (or the ability to perform at that level), and satisfactory conduct and attendance.

The disability retirement application must contain documentation that specifically demonstrates:

1. A deficiency in service with respect to performance, attendance or conduct, or, in the absence of any actual service deficiency, a showing that the medical condition is incompatible with either useful service or retention in the position.
2. A medical condition, which is defined as health impairment resulting from a disease or injury, including a psychiatric disease.
3. A relationship between the service deficiency and the medical condition such that the medical condition has caused the service deficiency.
4. The duration of the medical condition, both past and expected, and a showing that the condition, in all probability, will continue for at least a year.
5. The applicant's inability to render useful and efficient service arose while the employee was serving under the Federal Employees' Retirement System.
6. The inability of the employing agency to make reasonable accommodation to the employee's medical condition.
7. The agency's consideration of the employee for reassignment to any available position within the employing agency and commuting area, at the same grade and pay level, for which the employee is qualified.

INSTRUCTIONS

The Coordinator for Employment of the Handicapped should review the Applicant's Statement, the Supervisor's Statement, and the Physician's Statement, and any other relevant documentation on file to determine if reasonable accommodation will enable the employee to render fully successful service in his or her current position or whether a vacant position is available in the agency at the same grade or pay level in the same commuting area for which the employee is qualified for reassignment. Telephone numbers for the applicant, the supervisor, and the physician may be found on their respective statements, should it be necessary to contact them for further information.

Accommodation--Guidance for determining reasonable accommodations may be found in the following publications:

- Federal Personnel Manual, Chapter 306.
- Handbook on Reasonable Accommodations (PMS 720A)
- Handbook of Job Analysis for Reasonable Accommodations (PMS 720B)

The documentation supporting your response to item 4 on the other side must include an assessment of the functional and environmental factors related to the employee's inability to perform fully successfully, unless there were no medical restrictions.

After completing and certifying this form and attaching the appropriate documentation, you should return the original to the employee or to your personnel office according to instructions and practices in your agency. In either case, **A COPY MUST BE GIVEN TO THE EMPLOYEE.** Please **DO NOT** send the form directly to the Federal Employees' Retirement System unless OPM specifically requests you to do so in this case.

THE AGENCY'S OBLIGATION TO CONTINUE TO TRY TO REASSIGN THE EMPLOYEE DOES NOT CEASE WITH THE FILING OF THIS CERTIFICATION. Your efforts should continue until your agency receives OPM's decision on the application.

If necessary, you may be contacted by the Federal Employees' Retirement System for additional information or clarification.