

Information on Military Service



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I. Employee Rights While Performing Military Service

a. Employee Rights While Performing Military Service

- Employees called to active duty, are protected by the Uniformed Services Employment and Reemployment Rights Act (USERRA) against discrimination because of their service in the Armed Forces Reserve, the National Guard, or other uniformed services. USERRA prohibits an employer from denying any benefit of employment on the basis of an individual's membership, application for membership, performance of service, application for service, or obligation for service in the uniformed services. USERRA also protects the right of veterans, Reservists, National Guard members, and certain other members of the uniformed services to reclaim their civilian employment after being absent due to military service or training.

Agencies must tell employees who enter the service about their entitlements, obligations, benefits, and appeal rights.

An employee performing service (on active duty or active/inactive duty training) with the uniformed services must be permitted, upon request, to use any accrued annual or military leave during such service. An employee is entitled to use annual leave or military leave intermittently with leave without pay while on active duty or active/inactive duty training. An employee can request to separate when entering active duty.

Employees requesting leave without pay or separation to perform active military duty should complete the "Election of Benefits Coverage for Employees Called to Active Military Duty." (Attachment 1)

b. Contingency Operations

- Employees performing military service in support of contingency operations under National Defense Authorization Act for Fiscal Year 2002 (Public Law 107-107, December 28, 2001) are afforded additional rights.
- Contingency Operations are military operations that- "(A) is designated by the Secretary of Defense as an operation in which members of the armed forces are or may become involved in military actions, operations, or hostilities against an enemy of the United States or against an opposing military force; or (B) results in the call or order to, or retention on, active duty of members of the uniformed services under Section 688, 12301 (a), 12302, 12304, 12305, or 12406 of this title, chapter 15 of this title, or any other provision of law during a war or during a national emergency declared by the President or Congress." (10 U.S.C. 101 (a)(13))
 - Examples Given: Operation Enduring Freedom, Operation Noble Eagle, and Operation Iraqi Freedom – the list is dynamic due to changing military needs and therefore no list can be comprehensive
 - Military Orders should include a "Purpose" statement which will indicate the reason for active duty
 - Example: "MOBILIZATION IN SPT OF OPERATION ENDURING FREEDOM"

c. RIF Rights During Active Duty

- **An employee performing active military duty is protected from reduction in force (RIF) and may not be demoted or separated (other than military separation) while performing duty with the uniform services except for cause. Such employees are not considered “competing employees.” If their position is abolished during their active military duty, the agency must reassign the employee to another position of like status and pay.**

II. Types of Military Leave

a. Military Leave Under 5 U.S.C. 6323 (a)

- 5 U.S.C. 6323 (a) provides 15 days per fiscal year for active duty, active duty training, and inactive duty training. Military leave can be claimed for hours during which the employee would normally have worked and received pay and cannot be charged for non-duty days (e.g. holidays or weekends). Military leave must be claimed in 1 hour increments.

Up to 15 days (120 hours) of military leave may be accrued each fiscal year; a maximum of 15 days of military leave may be carried from one fiscal year to the next, any hours in excess of 120 will be forfeited at the beginning of the next fiscal year. The accrual rate is based on an 8 hour work day, accrual rates for part-time or uncommon tours of duty are pro-rated. Military employees are paid at their full civilian pay for all of the hours claimed under this provision.

Inactive Duty Training is authorized training performed by members of a Reserve component not on active duty and performed in connection with the prescribed activities of the Reserve component. It consists of regularly scheduled unit training periods, additional training periods, and equivalent training. For further information, see Department of Defense Instruction Number 1215.6, March 14, 1997

b. Military Leave Under 5 U.S.C. 6323 (b) Emergency Military Leave (22 Days)

- 5 U.S.C. 6323 (b) provides 22 workdays per calendar year for emergency duty as ordered by the President, the Secretary of Defense, or a State Governor. This leave is provided for employees who perform military duties in support of civil authorities in the protection of life and property or who perform full-time military service as a result of a call or order to active duty in support of a contingency operation* as defined in section 101(a)(13) of title 10, United States Code.
- Military personnel activated in support of a Contingency Operation AND/OR for Reservists and National Guards personnel called up in support of civil authorities in the protection of life and property are entitled to an additional 22 days of military leave under 5 U.S.C. 6323 (b).
- For military leave under 5 U.S.C. 6323(b) and (c), an employee is entitled to the greater of his civilian or military pay, not both. Under 5 U.S.C. 5519, the military pay received by an individual who has been activated in support of civil authorities or a contingency operation must be credited (less any travel, transportation, or other per diem allowances) against any Federal civilian pay the employee received during the 22 workdays of military leave (i.e. the employee's civilian pay is reduced by the amount of military pay for the days of military leave taken under this provision). An employee may choose not to take military leave and instead take annual leave in order to retain both full civilian and military pay. If the employee's military leave is less than the civilian pay, the Agency has decided to use the AD-343 (Request for Manual Pay) to pay the eligible employee the difference between the military pay and the civilian pay. The military pay will need to be submitted along with the amount of time being claimed in order to determine the offset amount to be paid to the employee.

An employee who has been activated in support of the national emergency whose duty extends into the next calendar year will be entitled to up to an additional 22 days of military leave under 6323(b), unused portions cannot be carried over into subsequent calendar years.

c. Military Leave Under 5 U.S.C. 6323 (c)

- 5 U.S.C. 6323(c) provides unlimited military leave to members of the National Guard of the District of Columbia for certain types of duty ordered or authorized under title 39 of the District of Columbia Code.
- For military leave under 5 U.S.C. 6323(b) and (c), an employee is entitled to the greater of his civilian or military pay, not both. Under 5 U.S.C. 5519, the military pay received by an individual who has been activated in support of civil authorities or a contingency operation must be credited (less any travel, transportation, or other per diem allowances) against any Federal civilian pay the employee received during the 22 workdays of military leave (i.e. the employee's civilian pay is reduced by the amount of military pay for the days of military leave taken under this provision). An employee may choose not to take military leave and instead take annual leave in order to retain both full civilian and military pay. If the employee's military leave is less than the civilian pay, the Agency has decided to use the AD-343 (Request for Manual Pay) to pay the eligible employee the difference between the military pay and the civilian pay. The military pay will need to be submitted along with the amount of time being claimed in order to determine the offset amount to be paid to the employee.

d. Military Leave Under 5 U.S.C. 6323 (d)

- 5 U.S.C. 6323(d) provides that Reserve and National Guard Technicians *only* are entitled to 44 workdays of military leave for duties overseas under certain conditions.

e. Administrative Leave for Certain Returning Military Members

- Federal employees returning from active duty military service who contributed to the war on terrorism (covers all employees who were activated for military service in connection with Operation Noble Eagle, Operation Enduring Freedom, Operation Iraqi Freedom, or any other military operations subsequently established under Executive Order 13223) are granted 5 days of administrative leave. The 5 days of administrative leave under this provision must be taken for the 5 days immediately preceding the employees return to the Federal civilian position.

f. Uniform Service Component

- Current military status is a data field inputted into NFC as the uniform service component. In order for an employee to receive military leave, they must have an appropriate current military status. HR Specialists should obtain the current military status on new hires or employees when they have reason to believe the military status is anything other than "0" (e.g. military service in application, request for LWOP-US, etc.). A sample letter for obtaining Uniform Service

**Component information can be sent to new hires or employees entering LWOP-US.
(Attachment 2)**

III. Leave Without Pay While Performing Military Service

a. LWOP-US

- LWOP-US is leave of absence to perform duty with the uniform service. A LWOP-US action is only processed for employees who are called to more than 30 days of active duty.
- The Uniformed Services Employment and Re-employment Rights Act of 1994 (USERRA) generally requires an agency to place an employee entering the military on LWOP unless the employee chooses to be placed on military leave or annual leave, as appropriate, or the employee requests to be separated. Full-time employees do not earn annual or sick leave in a pay period in which they have accumulated 80 hours of LWOP. In addition, part-time employees on LWOP also earn less annual and sick leave, since they earn leave based on the number of hours in a pay status.
- Request for LWOP-US (SF-52) should be accompanied by:
 - a copy of the military orders
 - Military Orders should include a “Purpose” statement which will indicate the reason for active duty (e.g. “training”)
 - completed “Election of Benefits Coverage for Employees Called to Active Military Duty” (form can be found at:
<http://www.afm.ars.usda.gov/hrd/payleave/reservist/WGFORM.pdf>)

b. Processing LWOP-US Actions

- NOAC/Authority is: 473 – LWOP-US; Q3K – 5 CFR, part 353
- When LWOP-US is in support of a Contingency Operation, you must add a second Authority: ZJW – Operation _____
 - The USDA currently picks up the FEHB employee premiums for employees on LWOP-US in support of contingency operations. In order for NFC to know that the LWOP-US is in support of a contingency operation and for the USDA to pay the premium, you must include the second authorization.
- If absence is to perform duty with the uniformed service there is no penalty for non-pay status, time is credited for the length of service purpose (SCD Leave) just as though the employee had remained in pay and duty status.

Sample LWOP-US SF-52 (non- Contingency Operation)

Standard Form 52
Rev. 7/91
U.S. Office of Personnel Management
FPM Supp. 286-33, Subch. 3

REQUEST FOR PERSONNEL ACTION

PART A - Requesting Office (Also complete Part B, Items 1, 7-22, 32, 33, 36, and 39.)

| | | |
|--|--|----------------------------|
| 1. Actions Requested LWOP US | | 2. Request Number |
| 3. For Additional Information Call (Name and Telephone Number) | | 4. Proposed Effective Date |
| 5. Action Requested By (Typed Name, Title, Signature, and Request Date) <p style="text-align: center;">11/28/2000</p> | | |
| 6. Action Authorized by (Typed Name, Title, Signature, and Concurrence Date) | | |

PART B - For Preparation of SF 50 (Use only codes in FPM Supplement 292-1. Show all dates in month-day-year order.)

| | | | | |
|--|--|----------------------------------|---------------------|------------------------|
| 1. Name (Last, First, Middle) | | 2. Social Security Number | 3. Date of Birth | 4. Effective Date |
| FIRST ACTION | | SECOND ACTION | | |
| 5-A. Code 5-B. Nature of Action 473 LWOP-US | | 6-A. Code 6-B. Nature of Action | | |
| 5-C. Code 5-D. Legal Authority Q3K 5 CFR 353 | | 6-D. Legal Authority | | |
| 5-E. Code 5-F. Legal Authority | | 6-E. Code 6-F. Legal Authority | | |
| 7. FROM Position Title and Number | | 15. TO Position Title and Number | | |
| 8. Pay Plan | 9. Occ. Code | 10. Grade or Level | 11. Step or Rate | 12. Total Salary |
| 13A. Basic Pay | 13B. Locality Adj. | 13C. Adj. Basic Pay | 13D. Other Pay | 13E. Pay Basis |
| 14. Name and Location of Position's Organization | 22. Name and Location of Position's Organization | | | |
| 16. Pay Plan | 17. Occ. Code | 18. Grade or Level | 19. Step or Rate | 20. Total Salary/Award |
| 21. Pay Basis | 23A. Basic Pay | 23B. Locality Adj. | 23C. Adj. Basic Pay | 23D. Other Pay |

EMPLOYEE DATA

| | | | | | |
|-------------------------|-----------------------------------|-------------------------------|------------------------------|--|---------------------------|
| 23. Veterans Preference | | 24. Tenure | | 25. Agency Use | 26. Veterans Pref for RIF |
| 1 - None | 2 - 10 Points/Disability | 3 - 10 Points/Other | 0 - None | 1 - Permanent | 2 - Indefinite |
| 3 - 5 Points | 4 - 10 Points/Compensable | 5 - 10 Points/Compensable/30% | | | |
| 27. FICA | 31. Service Comp. Use Leave | | 32. Work Schedule | 33. PER TIME FRAME PER Biweekly Pay Period | |
| 28. Annuity Indicator | 34. TUSA Category | | 35. Appropriation Code | | |
| | 3 - SES General 4 - SES Career | | E - Except N - Nonsupport | | |
| 36. Duty Station Code | | 37. Bargaining Unit Status | | | |

POSITION DATA

| | | | | | |
|-----------------------|--------------------------|---|----------------------|------------------------|---------------------|
| 34. Position Occupied | | 35. TUSA Category | | 36. Appropriation Code | |
| 38. Duty Station Code | | 39. Duty Station (City - County - State or Overseas Location) | | | |
| 40. Agency Data | 41. | 42. | 43. | 44. | |
| 45. Educational Level | 46. Year Degree Attained | 47. Academic Discipline | 48. Functional Class | 49. Citizenship | 50. Veterans Status |
| | | | | 1 - USA | 2 - Other |

PART C - Reviews and Approvals (Not to be used by requesting office.)

| 1. Office/Function | Initial/Signature | Date | Office/Function | Initial/Signature | Date |
|--------------------|-------------------|------|-----------------|-------------------|------|
| A. | | | D. | | |
| B. | | | E. | | |
| C. | | | F. | | |

2. Approval: I certify that the information entered on this form is accurate and that the proposed action is in compliance with statutory and regulatory requirements.

Signature _____ Approval Use: _____

PART D - Remarks by Requesting Office

(Note to Supervisors: Do you know of additional or conflicting reasons for the employee's resignation/retirement?
If "YES", please state these facts on a separate sheet and attach to SF 52.)

YES NO

Attached: Military Order
"Election of Benefits Coverage for Employees Called to Active Military Duty"

PART E - Employee Resignation/Retirement

Privacy Act Statement

You are requested to furnish a specific reason for your resignation or retirement and a forwarding address. Your reason may be considered in any future decision regarding your re-employment in the Federal service and may also be used to determine your eligibility for unemployment compensation benefits. Your forwarding address will be used primarily to mail you copies of any documents you should have or any pay or compensation to which you are entitled.

and agencies to issue regulations with regard to employment of individuals in the Federal service and their records, while section 8506 requires agencies to furnish the specific reason for termination of Federal service to the Secretary of Labor or a State agency in connection with administration of unemployment compensation programs.

This information is requested under authority of sections 301, 3301, and 8506 of title 5, U.S. Code. Sections 301 and 3301 authorize OPM

The furnishing of this information is voluntary; however, failure to provide it may result in your not receiving: (1) your copies of those documents you should have; (2) pay or other compensation due you; and (3) any unemployment compensation benefits to which you may be entitled.

1. Reasons for Resignation/Retirement (NOTE: Your reasons are used in determining possible unemployment benefits. Please be specific and avoid generalizations. Your resignation/retirement is effective at the end of the day - midnight - unless you specify otherwise.)

| | | | |
|-------------------|-------------------|----------------|---|
| 2. Effective Date | 3. Your Signature | 4. Date Signed | 5. Forwarding Address (Number, Street, City, State, ZIP Code) |
|-------------------|-------------------|----------------|---|

PART F - Remarks for SF 50

M67: Forwarding Address:

B66: An employee subject to the provisions of P.L. 108-375 is eligible for continued FEHB coverage up to 24 months when called to active duty and certain requirements (including serving in support of a contingency operation) are met. An Employee subject to the provisions of P.L. 108-454 is eligible for FEHB coverage for 24 months when absent because of service in the uniformed service and certain requirements are met. Contact your servicing Human Resources Office or see the FEHB Handbook at <http://www.opm.gov/insure> for detailed information.

B72: FEGLI coverage continues until your time in nonpay status totals 12 months. Contact your servicing Human Resources Office or see the FEGLI Handbook at <http://www.opm.gov/insure> for detailed information.

Sample LWOP-US SF-52 (Contingency Operation)

Standard Form 52
Rev. 7/91
U.S. Office of Personnel Management
FPM Supp. 298-33, Subpart 3

REQUEST FOR PERSONNEL ACTION

| | | | | | | |
|--|--|---|--|---|---|--|
| PART A - Requesting Office (Also complete Part B, Items 1, 7-22, 32, 33, 36, and 39.) | | | | | | |
| 1. Action Requested LWOP US | | | | 2. Request Number | | |
| 3. For Additional Information Call (Name and Telephone Number) | | | | 4. Proposed Effective Date | | |
| 5. Action Requested by (Typed Name, Title, Signature, and Request Date) 11/28/2000 | | | 6. Action Authorized by (Typed Name, Title, Signature, and Date) | | | |
| PART B - For Preparation of SF 50 (Use only codes in FPM Supplement 292-1. Show all dates in month-day-year order.) | | | | | | |
| 1. Name (Last, First, Middle) | | 2. Social Security Number | | 3. Date of Birth | 4. Effective Date | |
| FIRST ACTION | | | SECOND ACTION | | | |
| 5-A. Code 473 | 5-B. Nature of Action LWOP-US | | 5-A. Code | 5-B. Nature of Action | | |
| 5-C. Code Q3K | 5-D. Legal Authority 5 CFR 353 | | 5-C. Code | 5-D. Legal Authority | | |
| 5-E. Code ZJW | 5-F. Legal Authority Operation Enduring Freedom | | 5-E. Code | 5-F. Legal Authority | | |
| 7. FROM: Position Title and Number | | | 15. TO: Position Title and Number | | | |
| 8. Pay Plan | 9. Gov. Code | 10. Grade or Level | 11. Step or Rate | 12. Total Salary | 13. Pay Basis | |
| 16. Pay Plan | 17. Gov. Code | 18. Grade or Level | 19. Step or Rate | 20. Total Salary/Award | 21. Pay Basis | |
| 12A. Basic Pay | 12B. Locality Adj. | 12C. Adv. Basic Pay | 12D. Other Pay | 20A. Basic Pay | 20B. Locality Adj. | |
| 20C. Adv. Basic Pay | 20D. Other Pay | 20C. Adv. Basic Pay | 20D. Other Pay | | | |
| 14. Name and Location of Position's Organization | | | 22. Name and Location of Position's Organization | | | |
| EMPLOYEE DATA | | | | | | |
| 23. Veterans Preference 1 - None 3 - 10 Points/Qualify 5 - 10 Points/Other 2 - 5 Points 4 - 10 Points/Compensate 6 - 10 Points/Compensate/20% | | | 24. Tax Law 0 - None 2 - Casualty 1 - Retiree 3 - Military | | 25. Agency Use | |
| 27. FEGLI | | | 28. Annuity Indicator | | 26. Veterans Prof. for RF YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| 30. Retirement Plan | | | 31. Service Comp. Date (mm/yy) | | 29. Pay Plan Determined | |
| 32. Work Schedule | | | 33. Pay Plan (How Often Paid) | | 34. Pay Plan (How Often Paid) | |
| POSITION DATA | | | | | | |
| 34. Position Occupied 1 - Competitive Service 3 - SES Career 2 - Excepted Service 4 - SES Career | | 35. FLSA Category 0 - Exempt 71 - Nonexempt | | 36. Appropriation Code | 37. Beginning Unit Status | |
| 38. Duty Station Code | | | 39. Duty Station (City - County - State or Overseas Location) | | | |
| 40. Agency Data | 41. | 42. | 43. | 44. | | |
| 45. Educational Level | 46. Year Degree Attended | 47. Academic Degrees | 48. Functional Class | 49. Citizenship 1 - USA 0 - Other | 50. Veterans Status | |
| | | | | | 51. Supervisory Status | |
| PART C - Reviews and Approvals (Not to be used by requesting office.) | | | | | | |
| 1. Office/Function | Initial/Signature | | Date | Office/Function | Initial/Signature | |
| A. | | | | D. | | |
| B. | | | | E. | | |
| C. | | | | F. | | |
| 2. Approval: I certify that the information entered on this form is accurate and that the proposed action is in compliance with a statutory and regulatory requirements. | | | | Signature | Approval Date | |

PART D - Remarks by Requesting Office

(Note to Supervisors: Do you know of additional or conflicting reasons for the employee's resignation/retirement?
If "YES", please state these facts on a separate sheet and attach to SF 52.)

YES NO

Attached: **Military Order**
"Election of Benefits Coverage for Employees Called to Active Military Duty"

PART E - Employee Resignation/Retirement

Privacy Act Statement

You are requested to furnish a specific reason for your resignation or retirement and a forwarding address. Your reason may be considered in any future decision regarding your re-employment in the Federal service and may also be used to determine your eligibility for unemployment compensation benefits. Your forwarding address will be used primarily to mail you copies of any documents you should have or any pay or compensation to which you are entitled.

and agencies to issue regulations with regard to employment of individuals in the Federal service and their records, while section 8506 requires agencies to furnish the specific reason for termination of Federal service to the Secretary of Labor or a State agency in connection with administration of unemployment compensation programs.

This information is requested under authority of sections 301, 3301, and 8506 of title 5, U.S. Code. Sections 301 and 3301 authorize OPM

The furnishing of this information is voluntary; however, failure to provide it may result in your not receiving: (1) your copies of those documents you should have; (2) pay or other compensation due you; and (3) any unemployment compensation benefits to which you may be entitled.

1. **Reasons for Resignation/Retirement** (NOTE: Your reasons are used in determining possible unemployment benefits. Please be specific and avoid generalizations. Your resignation/retirement is effective at the end of the day - midnight - unless you specify otherwise.)

| | | | |
|-------------------|-------------------|----------------|---|
| 2. Effective Date | 3. Your Signature | 4. Date Signed | 5. Forwarding Address (Number, Street, City, State, ZIP Code) |
|-------------------|-------------------|----------------|---|

PART F - Remarks for SF 50

M67: Forwarding Address:
 B66: An employee subject to the provisions of P.L. 108-375 is eligible for continued FEHB coverage up to 24 months when called to active duty and certain requirements (including serving in support of a contingency operation) are met. An Employee subject to the provisions of P.L. 108-454 is eligible for FEHB coverage for 24 months when absent because of service in the uniformed service and certain requirements are met. Contact your servicing Human Resources Office or see the FEHB Handbook at <http://www.opm.gov/insure> for detailed information.
 B72: FEGLI coverage continues until your time in nonpay status totals 12 months. Contact your servicing Human Resources Office or see the FEGLI Handbook at <http://www.opm.gov/insure> for detailed information.

IV. Separations to Perform Military Service

a. Separation-US

- Military personnel called to active duty may request separation rather than LWOP.
- Request for Separation-US (SF-52) should be accompanied by:
 - a copy of the military orders
 - Military Orders should include a “Purpose” statement which will indicate the reason for active duty (e.g. “training”)
 - completed “Election of Benefits Coverage for Employees Called to Active Military Duty” (form can be found at:
<http://www.afm.ars.usda.gov/hrd/payleave/reservist/WGFORM.pdf>)

b. Processing Separation-US Actions

- NOAC/Authority is: 353 – Separation-US; Q3K – 5 CFR, part 353
- When Separation-US is in support of a Contingency Operation, you must add a second Authority: ZJW – Operation _____

Sample Separation-US SF-52 (non- Contingency Operation)

Standard Form 52
Rev. 7/91
U.S. Office of Personnel Management
FPM Supp. 296-33, Subch. 3

REQUEST FOR PERSONNEL ACTION

PART A - Requesting Office (Also complete Part B, Items 1, 7-22, 32, 33, 36, and 39.)

| | |
|--|---|
| 1. Actions Requested Separation-US | 2. Request Number |
| 3. For Additional Information Call (Name and Telephone Number) | 4. Proposed Effective Date 11/28/2000 |
| 5. Action Requested By (Typed Name, Title, Signature, and Request Date) | 6. Action Authorized by (Typed Name, Title, Signature, and Concurrence Date) |

PART B - For Preparation of SF 50 (Use only codes in FPM Supplement 292-1. Show all dates in month-day-year order.)

| | | | |
|--------------------------------------|----------------------------------|-------------------------|--------------------------|
| 1. Name (Last, First, Middle) | 2. Social Security Number | 3. Date of Birth | 4. Effective Date |
|--------------------------------------|----------------------------------|-------------------------|--------------------------|

| FIRST ACTION | | SECOND ACTION | |
|-------------------------|---|-----------------------------|------------------------------|
| 5-A. Code 353 | 5-B. Nature of Action Separation-US | 6-A. Code | 6-B. Nature of Action |
| 5-C. Code Q3K | 5-D. Legal Authority 5 CFR part 353 | 6-D. Legal Authority | 6-F. Legal Authority |
| 5-E. Code | 5-F. Legal Authority | 6-E. Code | 6-G. Legal Authority |

| 7. FROM: Position Title and Number | 15. TO: Position Title and Number | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|---------------------|--------------------|------------------------|------------------|---------------|----------------|--------------------|---------------------|----------------|--|--|--|--------------|---------------|--------------------|------------------|------------------------|---------------|----------------|--------------------|---------------------|----------------|--|--|
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>8. Pay Plan</th> <th>9. Occ. Code</th> <th>10. Grade or Level</th> <th>11. Step or Rate</th> <th>12. Total Salary</th> <th>13. Pay Basis</th> </tr> <tr> <td>12A. Basic Pay</td> <td>12B. Locality Adj.</td> <td>12C. Adj. Basic Pay</td> <td>12D. Other Pay</td> <td></td> <td></td> </tr> </table> | 8. Pay Plan | 9. Occ. Code | 10. Grade or Level | 11. Step or Rate | 12. Total Salary | 13. Pay Basis | 12A. Basic Pay | 12B. Locality Adj. | 12C. Adj. Basic Pay | 12D. Other Pay | | | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>16. Pay Plan</th> <th>17. Occ. Code</th> <th>18. Grade or Level</th> <th>19. Step or Rate</th> <th>20. Total Salary/Award</th> <th>21. Pay Basis</th> </tr> <tr> <td>20A. Basic Pay</td> <td>20B. Locality Adj.</td> <td>20C. Adj. Basic Pay</td> <td>20D. Other Pay</td> <td></td> <td></td> </tr> </table> | 16. Pay Plan | 17. Occ. Code | 18. Grade or Level | 19. Step or Rate | 20. Total Salary/Award | 21. Pay Basis | 20A. Basic Pay | 20B. Locality Adj. | 20C. Adj. Basic Pay | 20D. Other Pay | | |
| 8. Pay Plan | 9. Occ. Code | 10. Grade or Level | 11. Step or Rate | 12. Total Salary | 13. Pay Basis | | | | | | | | | | | | | | | | | | | | |
| 12A. Basic Pay | 12B. Locality Adj. | 12C. Adj. Basic Pay | 12D. Other Pay | | | | | | | | | | | | | | | | | | | | | | |
| 16. Pay Plan | 17. Occ. Code | 18. Grade or Level | 19. Step or Rate | 20. Total Salary/Award | 21. Pay Basis | | | | | | | | | | | | | | | | | | | | |
| 20A. Basic Pay | 20B. Locality Adj. | 20C. Adj. Basic Pay | 20D. Other Pay | | | | | | | | | | | | | | | | | | | | | | |

| | |
|---|---|
| 14. Name and Location of Position's Organization | 22. Name and Location of Position's Organization |
|---|---|

| EMPLOYEE DATA | | | |
|--------------------------------|---|--|--|
| 23. Veterans Preference | | 24. Tenure | 25. Agency Use |
| 1 - None 2 - 5-Point | 3 - 10-Point/Disability 4 - 10-Point/Compensable | 0 - None 1 - Permanent 2 - Conditional 3 - Indefinite | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| | | 28. Annuitant Indicator | 29. Pay Rate Determinant |
| 30. Retirement Plan | 31. Service Comp. Date (Leave) | 32. Work Schedule | 33. PFR Time Hours Per Biweekly Pay Period |

| POSITION DATA | | |
|---|--|-----------------------------|
| 34. Position Designated | | 35. FLSA Category |
| 1 - Competitive Service 2 - Excepted Service | 3 - SES General 4 - SES Career | E - Exempt N - Nonexempt |
| 36. Appropriation Code | 37. Bargaining Unit Status | |
| 38. Duty Station Code | 39. Duty Station (City - County - State or Overseas Location) | |

| | | | |
|------------------------|-----------------------------|------------------------|-------------------------------|
| 40. Agency Data | 41. | 42. | 43. |
| | | | |
| 44. | 48. Functional Class | 49. Citizenship | 50. Veterans Status |
| | | 1 - USA 8 - Other | |
| | | | 51. Supervisory Status |

PART C - Reviews and Approvals (Not to be used by requesting office.)

| 1. Office/Function | Initials/Signature | Date | Office/Function | Initials/Signature | Date |
|--------------------|--------------------|------|-----------------|--------------------|------|
| A. | | | D. | | |
| B. | | | E. | | |
| C. | | | F. | | |

2. Approval: I certify that the information entered on this form is accurate and that the proposed action is in compliance with statutory and regulatory requirements.

PART D - Remarks by Requesting Office

Note to Supervisors: Do you know of additional or conflicting reasons for the employee's resignation/retirement?

If "YES", please state these facts on a separate sheet and attach to SF 52.1

YES NO

Attached: Military Order
"Election of Benefits for Employees Called to Active Military Duty"

PART E - Employee Resignation/Retirement

Privacy Act Statement

You are requested to furnish a specific reason for your resignation or retirement and a forwarding address. Your reason may be considered in any future decision regarding your re-employment in the Federal service and may also be used to determine your eligibility for unemployment compensation benefits. Your forwarding address will be used primarily to mail you copies of any documents you should have or any pay or compensation to which you are entitled.

and agencies to issue regulations with regard to employment of individuals in the Federal service and their records, while section 8506 requires agencies to furnish the specific reason for termination of Federal service to the Secretary of Labor or a State agency in connection with administration of unemployment compensation programs.

This information is requested under authority of sections 301, 3301, and 8506 of title 5, U.S. Code. Sections 301 and 3301 authorize OPM

The furnishing of this information is voluntary; however, failure to provide it may result in your not receiving: (1) your copies of those documents you should have; (2) pay or other compensation due you; and (3) any unemployment compensation benefits to which you may be entitled.

1. Reasons for Resignation/Retirement (NOTE: Your reasons are used in determining possible unemployment benefits. Please be specific and avoid generalizations. Your resignation/retirement is effective at the end of the day - midnight - unless you specify otherwise.)

Employee's written notice of intent not to return to a position of employment with the agency.

OR

Employee's written notice of intent to separate in lieu of Leave Without Pay.

2. Effective Date 3. Your Signature

4. Date Signed

5. Forwarding Address (Number, Street, City, State, ZIP Code)

PART F - Remarks for SF 50

M67: Forwarding Address:

R19: Reason for resignation:

N27: Lump sum payment to be made for any unused annual leave. (If Applicable (Check the "Election of Benefits for Employees Called to Active Military Duty"))

V. Return to Duty from Military Service and Restoration Rights

a. Return to Civilian Duty

- Any Federal employee, permanent or temporary, who performs duty with a uniformed service (including active duty, active duty for training, or inactive duty training), whether voluntary or involuntary, is entitled to be restored to the position he or she would have attained had the employee not entered the uniformed service. While on duty with the uniformed services, the agency carries the employee on leave without pay unless the employee requests separation. A separation under these circumstances does not affect restoration rights. In order to be eligible for restoration rights the employee must:

give the agency advance notice of departure except where prevented by military circumstances; and
be released from uniformed service under honorable conditions; and
serve no more than a cumulative total of 5 years (exceptions are allowed for training and involuntary active duty extensions, and to complete an initial service obligation of more than 5 years); and
apply for restoration within the appropriate time limits.

b. Time Limits for Restoration Rights

For active duty of less than 31 days, the employee must report back to work at the beginning of the next scheduled workday following their release from service and the expiration of 8 hours after a time for safe transportation back to their residence. For active duty of more than 30 days, but less than 181 days, the employee must apply for re-employment within 14 days of release by the military. For active duty of more than 180 days, the employee must apply for reemployment within 90 days of release by the military.

- Employees who fail to meet these time limits are subject to disciplinary action.
- Agencies must reemploy as soon as practicable, but no later than 30 days after receiving the application. Agencies have the right to ask for documentation showing the length and character of the employee's service and the timeliness of the application.
- Applicants or employees who believe that an agency has not complied with the law or with OPM regulations governing the restoration rights of employees who perform duty with the uniformed services may file a complaint with the Department of Labor's local Veterans Employment and Training Service office or appeal directly to the Merit Systems Protection Board.

c. Retention Rights After Restoration

- Upon reemployment, the employee may not be discharged from employment for a period of 1 year following separation (6 months in the case of a Reservist called to active duty under 10 U.S.C. 12304 for more than 30 days, but less than 181 days, or ordered to an initial period of active duty for training of not less than 12

consecutive weeks), except for poor performance or conduct or for suitability reasons.

d. Restoration upon Return to Duty

- If the employee served less than 91 days in active duty, they must be restored to the position they would have attained (including WGIs, etc.) had their employment not been interrupted.
- If the employee served more than 90 days, the employee may be restored to the position they would have attained had their employment not been interrupted or to a position for which they qualify, of like seniority, status, and pay.
- Employees with service-connected disabilities who are not qualified for the above must be reemployed in a position that most closely approximates the position they would have been entitled to, consistent with the circumstances in each case.
- Upon return or restoration, an employee generally is entitled to be treated as though he or she had never left for purposes of rights and benefits based upon length of service. This means that the employee must be considered for career ladder promotions, and the time spent in the military will be credited for seniority, successive within-grade increases, probation, career tenure, annual leave accrual rate, and severance pay. An employee who was on a temporary appointment serves out the remaining time, if any, left on the appointment. (The military activation period does not extend the civilian appointment.)

e. Processing Return to Duty from LWOP-US and Restoration Actions

- NOAC/Authority is: 292 - RTD; Q3K - 5 CFR 353
- When the Return to Duty was from military service in support of a Contingency Operation, you must add a second Authority: ZJW – Operation _____
- Follow the instructions in Chapter 9 or 11 (as appropriate) of *The Guide to Processing Personnel Actions*, to document the employee's restoration upon completion of his or her military service. (e.g. Return from uniformed service, Exercises restoration rights under 38 U.S.C. 4301 et. seq., NOAC/Authority is: 100 -Career Appt; QAK and (Cite auth code for appt held prior to separation upon which restoration is based) - Reg. 353.207 and (Cite authority for appointment held prior to separation upon which restoration is based))

Sample RTD SF-52 (non- Contingency Operation)

Standard Form 52
Rev. 7/91
U.S. Office of Personnel Management
FPM Supp. 298-33, Subch. 3

REQUEST FOR PERSONNEL ACTION

| | |
|---|----------------------------|
| PART A - Requesting Office (Also complete Part B, Items 1, 7-22, 32, 33, 36, and 39.) | |
| 1. Actions Requested Return to Duty - US | 2. Request Number |
| 3. For Additional Information Call (Name and Telephone Number) | 4. Proposed Effective Date |
| 5. Action Requested By (Typed Name, Title, Signature, and Request Date) <p style="text-align: center;">11/28/2000</p> | |
| 6. Action Authorized by (Typed Name, Title, Signature, and Concurrence Date) | |

| | | | |
|--|---|--|--|
| PART B - For Preparation of SF 50 (Use only codes in FPM Supplement 292-1. Show all dates in month-day-year order.) | | | |
| 1. Name (Last, First, Middle) | 2. Social Security Number | 3. Date of Birth | 4. Effective Date 11/28/2000 |
| FIRST ACTION | | SECOND ACTION | |
| 5-A. Code 292 | 5-B. Nature of Action RTD | 5-A. Code | 5-B. Nature of Action |
| 5-C. Code Q3K | 5-D. Legal Authority 5 CFR part 353 | 5-D. Legal Authority | |
| 5-E. Code | 5-F. Legal Authority | 5-F. Legal Authority | |
| 7. FROM: Position Title and Number | | 15. TO: Position Title and Number | |
| 8. Pay Plan | 9. Occ. Code | 10. Grade or Level | 11. Step or Rate |
| 12. Total Salary | | 13. Pay Basis | |
| 16. Pay Rate GS | 17. Occ. Code 0202 | 18. Grade or Level 07 | 19. Step or Rate 2 |
| 20. Total Salary/Award \$25,060.00 | | 21. Pay Basis PA | |
| 20A. Basic Pay \$23,121.00 | 20B. Locality Adj. \$1,939.00 | 20C. Adj. Basic Pay \$25,060.00 | 20D. Other Pay |
| 14. Name and Location of Position's Organization | | 22. Name and Location of Position's Organization | |

| | | | |
|-------------------------|------------------------------|---|----------------------------|
| EMPLOYEE DATA | | | |
| 23. Veterans Preference | | 24. Tenure | |
| 1 - None | 3 - 10-Point/Disability | 0 - None | 2 - Conditional |
| 2 - 5-Point | 4 - 10-Point/Compensable | 1 - Permanent | 3 - Indefinite |
| 5 - 10-Point/Other | 6 - 10-Point/Compensable/30% | 25. Agency Use | |
| 27. FEG | | 28. Annuitant Indicator | |
| 30. Retirement Plan | | 31. Service Comp. Date (Month) | |
| 32. Work Schedule | | 33. PBR Time Hours Per Biweekly Pay Period | |
| POSITION DATA | | | |
| 34. Position Occupied | | 35. FLSA Category | |
| 1 - Competitive Service | 3 - SES General | E - Exempt | 36. Appropriation Code |
| 2 - Excepted Service | 4 - SES Career | N - Nonexempt | 37. Bargaining Unit Status |
| 38. Duty Station Code | | 39. Duty Station (City - County - State or Overseas Location) | |
| 40. Agency Data | 41. | 42. | 43. |
| 44. | 45. Educational Level | | 46. |
| 47. Academic Discipline | | 48. Citizenship | 49. Veterans Status |
| 50. Supervisory Status | | 1 - USA | 8 - Other |

| | | | | | |
|--|--------------------|------|-----------------|--------------------|---------------|
| PART C - Reviews and Approvals (Not to be used by requesting office.) | | | | | |
| 1. Office/Function | Initials/Signature | Date | Office/Function | Initials/Signature | Date |
| A. | | | D. | | |
| B. | | | E. | | |
| C. | | | F. | | |
| 2. Approval: I certify that the information entered on this form is accurate and that the proposed action is in compliance with statutory and regulatory requirements. | | | Signature | | Approval Date |

PART D - Remarks by Requesting Office

(Note to Supervisors: Do you know of additional or conflicting reasons for the employee's resignation/retirement?
If "YES", please state these facts on a separate sheet and attach to SF 52.)

YES NO

PART E - Employee Resignation/Retirement

Privacy Act Statement

You are requested to furnish a specific reason for your resignation or retirement and a forwarding address. Your reason may be considered in any future decision regarding your re-employment in the Federal service and may also be used to determine your eligibility for unemployment compensation benefits. Your forwarding address will be used primarily to mail you copies of any documents you should have or any pay or compensation to which you are entitled.

This information is requested under authority of sections 301, 3301, and 8506 of title 5, U.S. Code. Sections 301 and 3301 authorize OPM

and agencies to issue regulations with regard to employment of individuals in the Federal service and their records, while section 8506 requires agencies to furnish the specific reason for termination of Federal service to the Secretary of Labor or a State agency in connection with administration of unemployment compensation programs.

The furnishing of this information is voluntary; however, failure to provide it may result in your not receiving: (1) your copies of those documents you should have; (2) pay or other compensation due you; and (3) any unemployment compensation benefits to which you may be entitled.

1. **Reasons for Resignation/Retirement (NOTE: Your reasons are used in determining possible unemployment benefits. Please be specific and avoid generalizations. Your resignation/retirement is effective at the end of the day - midnight - unless you specify otherwise.)**

| | | | |
|-------------------|-------------------|----------------|---|
| 2. Effective Date | 3. Your Signature | 4. Date Signed | 5. Forwarding Address (Number, Street, City, State, ZIP Code) |
|-------------------|-------------------|----------------|---|

PART F - Remarks for SF 50

**P20: Position and pay reflect the following actions effective during employees absence:
(list of applicable actions; e.g. "702 Promotion, 11-20-99 to GS-0202-7/1 @ \$22,717pa; 894
Pay Adj, 01-03-00 to GS-0202-7/1 @ \$23,050pa; 893 Within-grad Inc, 11-23-00 to GS-0202-7/2 @
\$25,060pa")**

Sample Restoration SF-52

Standard Form 52
Rev. 7/91
U.S. Office of Personnel Management
FPM Supp. 296-33, Subch. 3

REQUEST FOR PERSONNEL ACTION

| | |
|---|----------------------------|
| PART A - Requesting Office (Also complete Part B, Items 1, 7-22, 32, 33, 36, and 39.) | |
| 1. Actions Requested Return from Uniform Service exercising restoration rights | 2. Request Number |
| 3. For Additional Information Call (Name and Telephone Number) | 4. Proposed Effective Date |
| 5. Action Requested By (Typed Name, Title, Signature, and Request Date) <p style="text-align: center;">11/28/2000</p> | |
| 6. Action Authorized by (Typed Name, Title, Signature, and Concurrence Date) | |

| | | | |
|--|---|--|-----------------------|
| PART B - For Preparation of SF 50 (Use only codes in FPM Supplement 292-1. Show all dates in month-day-year order.) | | | |
| 1. Name (Last, First, Middle) | | 2. Social Security Number | 3. Date of Birth |
| | | 4. Effective Date 11/28/2000 | |
| FIRST ACTION | | SECOND ACTION | |
| 5-A. Code 100 | 5-B. Nature of Action Career Appt | 6-A. Code | 6-B. Nature of Action |
| 5-C. Code QAK | 5-D. Legal Authority Reg. 353.207 | 6-D. Legal Authority | |
| 5-E. Code BDN | 5-F. Legal Authority USDA DEMO Beltsville | 6-F. Legal Authority | |
| 7. FROM: Position Title and Number | | 15. TO: Position Title and Number | |
| 8. Pay Plan (S, Doc. Code) | 10. Grade or Level | 11. Step or Rate | 12. Total Salary |
| 13. Pay Basis | 16. Pay Plan | 17. Occ. Code | 18. Grade or Level |
| 19. Step or Rate | 20. Total Salary/Award | 21. Pay Basis | |
| 12A. Basic Pay | 12B. Locality Adj. | 12C. Adj. Basic Pay | 12D. Other Pay |
| 20A. Basic Pay | 20B. Locality Adj. | 20C. Adj. Basic Pay | 20D. Other Pay |
| 14. Name and Location of Position's Organization | | 22. Name and Location of Position's Organization | |

| | | | |
|-------------------------|------------------------------|--|----------------------------|
| EMPLOYEE DATA | | | |
| 23. Veterans Preference | | 24. Tenure | |
| 1 - None | 3 - 10-Point/Disability | 0 - None | 2 - Conditional |
| 2 - 5-Point | 4 - 10-Point/Compensable | 1 - Permanent | 3 - Indefinite |
| 5 - 10-Point/Other | 6 - 10-Point/Compensable/30% | 25. Agency Use | |
| | | 26. Veterans Pref. for RIF <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| 27. FEGLI | | 28. Annuitant Indicator | |
| 30. Retirement Plan | | 31. Service Comp. Date (Leavol) | |
| | | 32. Work Schedule | |
| | | 33. Part Time Hours Per Biweekly Pay Period | |
| POSITION DATA | | | |
| 34. Position Occupied | | 35. FLSA Category | |
| 1 - Competitive Service | 3 - SES General | E - Exempt | 36. Appropriation Code |
| 2 - Excepted Service | 4 - SES Career | N - Nonexempt | 37. Bargaining Unit Status |
| 38. Duty Station Code | | 39. Duty Station (City - County - State or Overseas Location) | |
| 40. Agency Data | | 41. | 42. |
| | | 43. | 44. |
| 45. Educational Level | | 47. Academic Discipline | |
| | | 49. Citizenship | 50. Veterans Status |
| | | 1 - USA 8 - Other | 51. Supervisory Status |

| | | | | | |
|--|--------------------|------|-----------------|--------------------|---------------|
| PART C - Reviews and Approvals (Not to be used by requesting office.) | | | | | |
| 1. Office/Function | Initials/Signature | Date | Office/Function | Initials/Signature | Date |
| A. | | | D. | | |
| B. | | | E. | | |
| C. | | | F. | | |
| 2. Approval: I certify that the information entered on this form is accurate and that the proposed action is in compliance with statutory and regulatory requirements. | | | Signature | | Approval Date |

PART D - Remarks by Requesting Office

(Note to Supervisors: Do you know of additional or conflicting reasons for the employee's resignation/retirement?
If "YES", please state these facts on a separate sheet and attach to SF 52.)

YES NO

Attachment: Discharge notice (including "Honorable" discharge and date of discharge).

PART E - Employee Resignation/Retirement

Privacy Act Statement

You are requested to furnish a specific reason for your resignation or retirement and a forwarding address. Your reason may be considered in any future decision regarding your re-employment in the Federal service and may also be used to determine your eligibility for unemployment compensation benefits. Your forwarding address will be used primarily to mail you copies of any documents you should have or any pay or compensation to which you are entitled.

This information is requested under authority of sections 301, 3301, and 8506 of title 5, U.S. Code. Sections 301 and 3301 authorize OPM

and agencies to issue regulations with regard to employment of individuals in the Federal service and their records, while section 8506 requires agencies to furnish the specific reason for termination of Federal service to the Secretary of Labor or a State agency in connection with administration of unemployment compensation programs.

The furnishing of this information is voluntary; however, failure to provide it may result in your not receiving: (1) your copies of those documents you should have; (2) pay or other compensation due you; and (3) any unemployment compensation benefits to which you may be entitled.

1. Reasons for Resignation/Retirement (NOTE: Your reasons are used in determining possible unemployment benefits. Please be specific and avoid generalizations. Your resignation/retirement is effective at the end of the day - midnight - unless you specify otherwise.)

2. Effective Date | 3. Your Signature | 4. Date Signed | 5. Forwarding Address (Number, Street, City, State, ZIP Code)

PART F - Remarks for SF 50

M39: Creditable Military Service
M40: Previously Covered
T07: Completed service requirement for career tenure from 1/05/97 to 1/04/00.
P06: Pay rate includes WGI's or other rate changes to which employee would have been entitled had he or she remained continuously in Federal service.
K38: Promoted from GS-0202-06, effective 11-20-99.
M38: Frozen Service:
M45: Employee is automatically covered under FERS.
M10: OPF maintained by USDA, ARS, HRD, 5601 Sunnyside Avenue, Beltsville, MD 20705

VI. Related Actions

a. Change in Veterans' Preference

- If called to active duty after an employee has entered on duty, the employee may become eligible for Veterans Preference and/or Veterans Preference for RIF. After the employee has returned to duty, the evidence furnished by the employee (usually the DD-214) should be reviewed to see if a change is warranted. Refer to the Office of Personnel Management's "VetGuide" for more information on determining Veterans' Preference. Refer to the "Restructuring Information Handbook, Module 3, Reduction-in-Force" and/or the Office of Personnel Management's "Employees Guide to Reduction in Force" for more information on determining Veterans' Preference for RIF.

b. Processing Change in Veterans' Preference Actions

- NOAC/Authority is: 883-Chg in Vet Pref for RIF; CCM-5 U.S.C. 2108
- The appropriate values in block 23 and/or block 26 should be entered.
- Evidence used to determine preference eligibility should be filed on the right side of the OPF.

Sample Chg in Vet Pref for RIF SF-52

Standard Form 52
Rev. 7/91
U.S. Office of Personnel Management
FPM Supp. 296-33, Subch. 3

REQUEST FOR PERSONNEL ACTION

PART A - Requesting Office (Also complete Part B, Items 1, 7-22, 32, 33, 36, and 39.)

| | | |
|--|--|--|
| 1. Actions Requested Change in Veterans' Preference for Reduction in Force | | 2. Request Number |
| 3. For Additional Information Call (Name and Telephone Number) | | 4. Proposed Effective Date 11/28/2000 |
| 5. Action Requested By (Typed Name, Title, Signature, and Request Date) 11/28/2000 | | 6. Action Authorized by (Typed Name, Title, Signature, and Concurrence Date) |

PART B - For Preparation of SF 50 (Use only codes in FPM Supplement 292-1. Show all dates in month-day-year order.)

| | | | | |
|--|---------------|---|------------------|--|
| 1. Name (Last, First, Middle) FIRST ACTION | | 2. Social Security Number | 3. Date of Birth | 4. Effective Date 11/28/2000 |
| 5-A. Code 883 | | 5-B. Nature of Action Chg in Vet Pref for RIF | | |
| 5-C. Code CCM | | 5-D. Legal Authority 5 U.S.C. 2109 | | |
| 5-E. Code | | 5-F. Legal Authority | | |
| 7. FROM: Position Title and Number | | 15. TO: Position Title and Number | | |
| 8. Pay Plan | 9. Occ. Code | 10. Grade or Level | 11. Step or Rate | 12. Total Salary |
| 12B. Locality Adj. | | 12C. Adj. Basic Pay | | 12D. Other Pay |
| 14. Name and Location of Position's Organization | | 22. Name and Location of Position's Organization | | |
| 16. Pay Plan | 17. Occ. Code | 18. Grade or Level | 19. Step or Rate | 20. Total Salary/Award |
| 20A. Basic Pay | | 20B. Locality Adj. | | 20C. Adj. Basic Pay |
| 20D. Other Pay | | 21. Pay Basis | | |

EMPLOYEE DATA

| | | | | | |
|---|--|-------------------------------|--|--------------------------|---|
| 23. Veterans Preference 2 | | 24. Tenure 0 - None | | 25. Agency Use | 26. Veterans Pref for RIF X YES |
| 27. FEGLI | | 28. Annuitant Indicator | | 29. Pay Rate Determinant | |
| 30. Retirement Plan | | 31. Service Comp. Date (Year) | | 32. Work Schedule | |
| 33. Part-Time Hours Per Biweekly Pay Period | | | | | |

POSITION DATA

| | | | | | | |
|--|--|---|--|------------------------|--|----------------------------|
| 34. Position Character 1 - Competitive Service | | 35. FLSA Category E - Exempt | | 36. Appropriation Code | | 37. Bargaining Unit Status |
| 38. Duty Station Code | | 39. Duty Station (City - County - State or Overseas Location) | | | | |

| | | | | | | |
|-----------------------|--------------------------|-------------------------|----------------------|-----------------------------------|---------------------|------------------------|
| 40. Agency Date | 41. | 42. | 43. | 44. | | |
| 46. Educational Level | 48. Year Degree Attained | 47. Academic Discipline | 49. Functional Class | 48. Citizenship 1 - USA | 50. Veterans Status | 51. Supervisory Status |

PART C - Reviews and Approvals (Not to be used by requesting office.)

| 1. Office/Function | Initial/Signature | Date | Office/Function | Initial/Signature | Date |
|--|-------------------|------|-----------------|-------------------|---------------|
| A. | | | D. | | |
| B. | | | E. | | |
| C. | | | F. | | |
| 2. Approval: I certify that the information entered on this form is accurate and that the proposed action is in compliance with statutory and regulatory requirements. | | | Signature | | Approval Date |

PART D - Remarks by Requesting Office

(Note to Supervisors: Do you know of additional or conflicting reasons for the employee's resignation/retirement?
If "YES", please state these facts on a separate sheet and attach to SF 52.)

YES NO

Attachment: DD-214

PART E - Employee Resignation/Retirement

Privacy Act Statement

You are requested to furnish a specific reason for your resignation or retirement and a forwarding address. Your reason may be considered in any future decision regarding your re-employment in the Federal service and may also be used to determine your eligibility for unemployment compensation benefits. Your forwarding address will be used primarily to mail you copies of any documents you should have or any pay or compensation to which you are entitled.

This information is requested under authority of sections 301, 3301, and 8506 of title 5, U.S. Code. Sections 301 and 3301 authorize OPM

and agencies to issue regulations with regard to employment of individuals in the Federal service and their records, while section 8506 requires agencies to furnish the specific reason for termination of Federal service to the Secretary of Labor or a State agency in connection with administration of unemployment compensation programs.

The furnishing of this information is voluntary; however, failure to provide it may result in your not receiving: (1) your copies of those documents you should have; (2) pay or other compensation due you; and (3) any unemployment compensation benefits to which you may be entitled.

1. **Reasons for Resignation/Retirement** (NOTE: Your reasons are used in determining possible unemployment benefits. Please be specific and avoid generalizations. Your resignation/retirement is effective at the end of the day - midnight - unless you specify otherwise.)

| | | | |
|-------------------|-------------------|----------------|---|
| 2. Effective Date | 3. Your Signature | 4. Date Signed | 5. Forwarding Address (Number, Street, City, State, ZIP Code) |
|-------------------|-------------------|----------------|---|

PART F - Remarks for SF 50

VII. Web Sites for More Information

- **ARS form for Election of Benefits Coverage for Employees Called to Active Military Duty**
 - <http://www.afm.ars.usda.gov/hrd/payleave/reservist/WGFORM.pdf>
- **General Information**
 - <http://www.opm.gov/veterans/>
 - <http://www.opm.gov/veterans/html/vetguide.asp#Reduction%20in%20Military%20Retired%20Pay>
- **Military Leave**
 - <http://www.opm.gov/oca/LEAVE/HTML/MILOA.asp>
 - <http://www.opm.gov/oca/LEAVE/HTML/MILITARY.ASP>
- **Veterans Preference for RIF**
 - <http://www.opm.gov/rif/handbook/rif03b98.pdf>
 - <http://www.opm.gov/rif/general/rifguide.pdf>

Election of Benefits Coverage for Employees Called to Active Military Duty

| | | |
|--|--|---|
| USDA-ARS Human Resources Division 5601 Sunnyside Avenue Beltsville, MD 20705-5107 | ELECTION OF BENEFITS COVERAGE FOR EMPLOYEES CALLED TO ACTIVE MILITARY DUTY Requesting Leave Without Pay or Separating (for more than 30 days) (current as of February 26, 2003) | |
| EMPLOYEE NAME (PLEASE TYPE OR PRINT) | SSN: | DATE LWOP BEGAN: _____ Or DATE OF SEPARATION: _____ |
| MAILING ADDRESS FOR OFFICIAL CORRESPONDENCE AND CONTACT TELEPHONE NUMBER: _____ _____ _____ | | |
| Federal Employee Health Benefits (FEHB) | | |
| The FEHB Program allows you to continue coverage at no cost to you for up to 18 months while you are on leave without pay (LWOP) or separate to enter active duty military. At the end of the 18 months your coverage will terminate. You and your eligible family members will have 31 days to convert to a non-group policy. When you return to active Federal Service you can enroll in an FEHB plan within 60 days of the return to service (as long as the position is not excluded from coverage). If you do not want to continue your FEHB please check below, sign, and date this form. The termination is not considered a break in the continuous coverage necessary for continuing FEHB coverage into retirement. However, the period during which the termination is in effect does not count toward satisfying the required 5 years of continuous coverage. | | |
| Continue the enrollment Terminate the enrollment Not Enrolled | | |
| Lump-Sum Annual Leave | | |
| As an employee called to active military duty you may choose to (1) have your annual leave remain to your credit until you return to your civilian position, or (2) receive a lump-sum payment for all accrued and accumulated annual leave. There is no requirement for you to separate from your civilian Federal position in order to receive the lump-sum payment, you must refund your agency an amount equal to the pay that covers the period between the date of reemployment and the expiration of the lump-sum leave period. | | |
| I want my annual leave to remain I elect a lump-sum payment for my annual leave* I elect to use my annual leave while on active duty** I elect to use my military leave while on active duty** | | |
| *There is no requirement for you to separate from your civilian federal position in order to receive the lump-sum payment. If you return to your civilian position prior to the end of the period covered by the lump-sum payment, you must refund your agency an amount equal to the pay that covers the period between the date of reemployment and the expiration of the lump-sum period. | | |
| **I understand that when I am performing active military duty, my compensation will be based on the terms of my military pay grade. Compensation from my civilian position will not be received unless I elect to use military or annual leave. I will work out the details of my leave usage (annual and Military) with my supervisor and timekeeper before I report for active duty. | | |

Thrift Savings Plan (TSP) Loan Payments

If you are currently making loan payments to TSP, while you are on LWOP to perform military service, you will be permitted to suspend payments on your loan until you return to pay status. Although loan payments will not be due before then, interest will continue to accrue for the entire period. (You cannot repay your civilian TSP loan by making loan allotments from your uniformed services pay.) The maximum time limits for repayments, 5 years for general purpose loans or 18 years for residential loans, will be extended by the length of your military service. If you separate, TSP will send you a notice with instructions to repay your loan within 90 days. If you do not pay the loan in full within the required date, the outstanding balance of your loan and any unpaid interest will be reported to the IRS as a taxable distribution.

Are you currently paying a civilian TSP loan? YES NO

CERTIFICATION

Employee Signature

Date

Agency Representative

Date

(Please complete, sign, and return this document with your SF-52, "Request for Personnel Action", and a copy of your military orders, to your personnel contact)

Attachment 2

SUBJECT: Uniform Service Component

TO: EMPLOYEE NAME

FROM: HUMAN RESOURCES SPECIALIST, Human Resources Specialist,
301-504-XXXX

The Agricultural Research Service requires that we collect military status data for all employees.

Please check the appropriate box indicating your current military status, if any. Retired military personnel should check the appropriate box and also show the date of such retirement in the "Date Retired Military Service" block.

NONE

Ready Reserve

Standby Reserve

- 3 National Guard
- 4 Retired Military – Regular
- 5 Retired Military – Non regular

Retired Military – Regular and Reserve/National Guard

- 7 Retired Military – Non regular and Reserve/National Guard

Date Retired Military Service _____

Please contact your servicing Human Resources Specialist to update your military status at any time during your employment or if you have any questions regarding this form.