

**INITIAL TOTAL COMPENSATION FORM**

**I. Determining Annual Pay Target**

A. List the data or information used to develop the bottom of the pay range. (Please refer to Section 9 of the Manual for instructions on establishing the bottom of the pay range.)

B. Please indicate the amount representing the bottom of the pay range and provide a brief explanation of how this was determined based on the information listed above.

C. If recommending an annual pay target above the amount indicated in B above (up to 6% above the figure listed in B above), please identify from the criteria listed below those that support the annual pay target selection. (Please refer to Section 9 of the Manual for additional information.)

| <i>Position-related attributes and challenges of the position)</i> |   | <i>Applies</i> | <i>No</i> |
|--|---|----------------|-----------|
| (1)  | Criticality of the program to the mission of ORD and the Agency | [    ]         | [    ]    |

Comments:

|     |   |        |        |
|-----|---|--------|--------|
| (2) | Complexity of programs or projects, problems solved, difficulty and originality in work performed | [    ] | [    ] |
|-----|---|--------|--------|

Comments:

|     |  |        |        |
|-----|--|--------|--------|
| (3) | Decision-making authority, independence, or freedom to act | [    ] | [    ] |
|-----|--|--------|--------|

Comments:

|     |  |        |        |
|-----|--|--------|--------|
| (4) | Resource management, including responsibility for human, financial, space, facilities and material resources | [    ] | [    ] |
|-----|--|--------|--------|

Comments:

|     |   |        |        |
|-----|---|--------|--------|
| (5) | Scope of impact that the individual will exercise at varying levels across the organization when impact relates to how influential the position is within ORD based on the importance of decisions or final recommendation rendered | [    ] | [    ] |
|-----|---|--------|--------|

Comments:

|     |  |        |        |
|-----|--|--------|--------|
| (6) | Importance or frequency of interactions with various individuals or groups within or outside of ORD and the effect of these interactions | [    ] | [    ] |
|-----|--|--------|--------|

on accomplishing the ORD mission.

Comments:

*Candidate-related (personal and professional attributes essential for effective performance and other elements required to recruit outstanding candidates)*

(1) Recognition of the individual within the scientific community [ ] [ ]

Comments:

(2) Specific skills and knowledge and expertise of benefit to ORD and the Agency. [ ] [ ]

Comments:

(3) Productivity and impact of the individual on the scientific field [ ] [ ]

Comments:

(4) Level of originality of the individual's past and current ideas and work products. [ ] [ ]

Comments:

(5) Potential impact of anticipated scientific findings [ ] [ ]

Comments:

**Annual Pay Target:**

**II. Determining Recommended Annual Leave Accrual Rate**

A. Provide the candidate's current or most recent annual leave entitlement.

B. If available, provide competing annual leave entitlements that the candidates may be considering in relation to that offered by EPA, if based on comparable position(s).

C. Total number of years of Federal service or comparable non-Federal work experience [ ]

**Recommended annual leave accrual rate:**

**III. Determining Recommended Incentive Payments**

- A. Describe the relevant factors or issues considered in determining the type and level of the incentive payment.
- B. Describe how these factors or issues led to a determination of the type and level of incentive payment.
- C. Indicate the type of incentive payment (i.e., recruitment incentive or relocation incentive)

(Note: Please provide the following additional information if recommending a relocation incentive.)

- 1. Relocation from (office title and location):
- 2. Relocation to (office title, location):
- 3. Describe the change in work assignment from:
- 4. Describe the change in work assignment to:

**Recommended recruitment incentive figure:**

**Percentage of base salary:**

**Recommended relocation incentive figure:**

**Percentage of base salary:**

**IV. Summary — Total Compensation**

|                           |                             |
|---------------------------|-----------------------------|
| Annual Pay Target         | \$                          |
| Recruitment Incentive     | \$                          |
| Relocation Incentive      | \$                          |
| <b>Total</b>              | \$                          |
| Annual leave accrual rate | in ( ) hours per pay period |

**Recommending Official** \_\_\_\_\_ **Date** \_\_\_\_\_

**Budget Official\*** \_\_\_\_\_ **Date** \_\_\_\_\_

**Account Number** \_\_\_\_\_

(\* Budget Official's signature and account number required only when a recruitment or relocation incentive is being recommended)

**Approving Official** \_\_\_\_\_ **Date** \_\_\_\_\_

**HR Officer** \_\_\_\_\_ **Date** \_\_\_\_\_

**RECRUITMENT AND RELOCATION INCENTIVE  
SERVICE AGREEMENT**

In consideration of receipt of an incentive payment for which I qualify under the Environmental Protection Agency's (EPA's) Title 42 Operations Manual, I hereby agree:

1. To serve in the EPA for one year, subject to the terms and conditions set forth below and pertinent statutory and regulatory requirements. For a relocation incentive, the service will be at \_\_\_\_\_.  
(duty station)
2. That the figure of the incentive payable to me shall be determined by the EPA as prescribed in the Title 42 Operations Manual. The incentive payable to me under this agreement is \$\_\_\_\_\_.
3. That acceptance of this agreement does not alter the conditions or terms of my employment.
4. This incentive payment is based solely on the position to which I am assigned. Accordingly, this agreement will not preclude nor limit EPA from effecting actions as may be appropriate.
5. (a) That in the event that I fail to complete the period of service in the position for which I receive the incentive, I will refund a pro-rated portion of the incentive that I have received. The figure to be refunded to EPA shall be determined by crediting each full month of service under this agreement.  
  
(b) It is further agreed that any portion of the incentive that I am obligated to refund will be a debt due to the United States that I hereby agree to pay in full as directed by EPA.
6. That the effective date of this agreement will be the date of the appointment. Payment of the incentive will normally be made within two pay periods of the effective date.

|   |
|---|
| <b>I Agree to the Terms of this Contract.</b> |
| _____<br>(Signature)                          |
| _____<br>(Print/Type Name)                    |
| _____<br>(Date)                               |

|   |
|---|
| <b>Completed by HRO:</b> Employee's organization:<br>Effective date of agreement: |
|---|