

**APPENDIX E**  
**QUESTIONNAIRE FOR SOCIAL DATA TO DETERMINE SOCIAL-RETENTION**  
**STANDING DURING A REDUCTION IN FORCE AND TO DETERMINE PROSPECTS FOR**  
**CONTINUED EMPLOYMENT**

1. Name and address:

To prepare for the proper implementation of a change within your organization that requires application of reduction in force (RIF) procedures, you must answer the questions below and provide pertinent documentation. Please review information preprinted on this form and correct wherever necessary. The information provided will be treated as confidential.

Employee identification number:

2. Date of birth:

3. Employing organization:

4. Position title:

5. Grade:

6. Monthly wage or salary: \_\_\_\_\_ euros

7. Creditable service:

8. Regular workhours:

9. Tax class:

10. Tax exemption for children:

11. Are you a member of the protected group of severely handicapped or assimilated employees?

No       Yes

If Yes, indicate the degree of handicap: \_\_\_\_\_. (Please provide a copy of the severely handicapped pass.)

12. If the handicap degree is less than 50, are you recognized as an employee with assimilated status?

No       Yes (Please provide a copy of the recognition certificate.)

13. Are you currently protected under the Mother Protection Law or the Law on Childcare Leave?

No       Yes

14. Marital Status:

single       married       widow(er)       divorced

registered civil partner       permanently separated

15. Does your spouse or registered civil partner draw his or her own income? (Income falling below the income limit for insignificant employment (currently 400 euros per month) will not be considered.)

No       Yes

16. Liability for Family member support:

No       Yes      Number of children: \_\_\_\_\_

(This includes children of the employee who are unmarried and under 18 years of age or who are entitled to children allowance, regardless of age. To have your children recognized as dependent children, an appropriate entry on an income tax card or proof of support liability is required.)

Other persons entitled to financial support (please provide a copy of the approval document):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. Are you a single parent?

No       Yes

18. Do you have a permanent, recognized health impairment that was caused by employment with the U.S. Forces?

No       Yes      (Please provide certification from the Federal Statutory Accident Insurance Agency.)

With your signature, you certify that the entries on and the attachments to this form are true, complete, and correct to the best of your knowledge:

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature

The completed questionnaire must be returned to the servicing personnel office by \_\_\_\_\_.

### Additional Data for Use in the Local National Priority Placement Program

The information solicited on this form is used to record and maintain placement entitlements, as well as to implement potential placement opportunities by means of the automated Local National Priority Placement Program (LNPPP). Providing this information is completely voluntary; we ask you, however, to complete this form as thoroughly as possible to enhance and increase continued employment opportunities for yourself.

With regard to your asserting placement entitlements for an available position of equal value outside your commuting area and for a lower graded position outside the commuting area or in a position within the commuting area with a tariff rate that goes below your current tariff rate by more than 20 percent but no more than the maximum amount that you specified to be reasonably financially acceptable, we explicitly point out that your respective input is binding with the understanding that—

- You will not receive another offer for continuation of employment within or outside the commuting area if, after issuance of the notice of termination, you decline an offer for a position of equal value outside the commuting area.

- If you decline a position of equal value outside the commuting area, you will be granted benefits under Article 7 of the *Tarifvertrag vom 2. Juli 1997 über Rationalisierungs-, Kündigungs- und Einkommensschutz (SchutzTV)* (Protection Agreement) only if you decline the offer for important personal reasons that can be proven and verified objectively.

- You will not receive another offer for continuation of employment in a lower graded position outside the commuting area or in a position within the commuting area with a tariff rate that goes below your current tariff rate by more than 20 percent, but no more than the maximum amount that you specified to be reasonably financially acceptable, if you decline a corresponding offer for continued employment within or outside the commuting area.

- If you accept an offer for continuation of employment in a lower graded position outside the commuting area or in a position within the commuting area with a tariff rate that goes below your current tariff rate by more than 20 percent, but no more than the maximum amount that you specified to be reasonably financially acceptable, pay protection under Articles 5 and 8 of the *SchutzTV* will be granted based on only the tariff rate of the wage or salary group of a position that is not more than 20 percent below your current position.

1. Name:

Employee Identification Number:

2. Home telephone:

3. Duty telephone:

4. Mobile telephone:

5. E-mail address:

6. Supervisor:

7. Telephone number:

8. Available for the following type of work:

- Full time     Part time     On call     Shift  
 Night     Weekend     Holiday     Rotating shift

9. Language and other knowledge and skills:

Languages skills (You may be requested to take a language test to verify your language skills.)												
List languages. Indicate knowledge as appropriate.												
Languages	Reading			Writing			Speaking			Understanding		
	Excellent Level III	Good Level II	Fair Level I	Excellent Level III	Good Level II	Fair Level I	Excellent Level III	Good Level II	Fair Level I	Excellent Level III	Good Level II	Fair Level I
English												
German												

**Definitions:**

**Level I (Fair):** Basic knowledge that enables the speaker to have simple conversations on general topics and receive verbal and written instructions.

**Level II (Good):**

**Reading:** Able to read within a normal range of speed and with almost complete comprehension of a variety of material on unfamiliar subjects. Can comprehend a variety of styles and wording pertinent to professional needs. Rarely misinterprets texts.

**Writing:** Able to write routine correspondence. Shows ability to write with some precision and some detail about most common topics.

**Speaking:** Able to meet most work requirements with language use that is acceptable and effective. Able to speak the language with sufficient structural accuracy and vocabulary to participate effectively in most formal and informal conversations on practical, social, and professional topics.

**Understanding:** Understands most oral information on unfamiliar subjects, including job-driven wording. Rarely misinterprets oral information.

**Level III (Excellent):**

**Reading:** Able to read fluently and accurately all styles and structures of the language pertinent to professional needs.

**Writing:** Able to write the language precisely and accurately in a variety of prose styles pertinent to professional and educational needs. Errors in grammar are rare, including those in complex structures. Able to adapt the language to the situation. Able to write on all topics pertinent to professional needs and on social issues of a general nature.

**Speaking:** Able to use the language fluently and accurately on all common levels normally pertinent to professional needs. Language use and ability to function are fully satisfactory.

**Understanding:** Able to completely understand any information on unfamiliar subjects, including job-driven wording.

Special skills/Other knowledge and skills	
Enter special skills, knowledge, and abilities (for example, typing, stenography, draftsman, advanced training).	
1.	<p style="text-align: center;"><b>Drivers license classes</b> (The number(s) in ( ) indicate the old classes.)</p> <input type="checkbox"/> B (3) <input type="checkbox"/> BE (3) <input type="checkbox"/> S (5) <input type="checkbox"/> C (2) <input type="checkbox"/> CE (2) <input type="checkbox"/> C1 (3) <input type="checkbox"/> C1E (3) <input type="checkbox"/> D <input type="checkbox"/> DE <input type="checkbox"/> D1 <input type="checkbox"/> D1E <input type="checkbox"/> T (5) <input type="checkbox"/> L (5) <input type="checkbox"/> Forklift-Operator Certificate <input type="checkbox"/> Dangerous-Cargo License <input type="checkbox"/> Crane-Operator License
2.	
3.	
4.	
5.	
6.	

10. Computer knowledge (rate knowledge using excellent, good, or fair):

Microsoft Office Word:	Microsoft Office Access:
Microsoft Office Excel:	Microsoft Office Outlook:
Microsoft Office PowerPoint:	
Other computer programs:	

11. Additional professional skills/qualifications/training certificates (please attach proof):

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Place, date

Signature

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**Information About Your Commuting Area**

If your residence is within a radius of 60 kilometers from your current permanent duty station, your commuting area includes all organizations that are located within a radius of 60 kilometers from your permanent duty station. (You will be registered automatically in the LNPPP for all duty stations within your commuting area.)

If your residence is outside a radius of 60 kilometers from your current permanent duty station, your commuting area can include all organizations that are within the radius of 60 kilometers from your permanent residence. At your discretion, you may choose a radius of 60 kilometers from your duty station as your commuting area.

I choose the radius of 60 kilometers from my current duty station as the commuting area.

I choose the radius of 60 kilometers from my current residence as the commuting area.

You must make your final choice of commuting area within 1 week after receipt of the termination letter.

The distance is always measured from center of town to center of town.

**Information about Your Availability for Continued Employment in Lower Graded Positions**

If you wish to be considered for an available lower graded position outside your commuting area or for a position within your commuting area in a wage or salary group with a tariff rate that is more than 20 percent below your current tariff rate, but no more than you specified to be the reasonably financially acceptable amount, because no favorable opportunity for continued employment is available for you, please provide binding information about the maximum amount the tariff rate of the position's wage or salary may be below your current tariff rate, and whether you wish to be considered for a corresponding position within or outside the commuting area.

I wish to be considered for continued employment within the commuting area in a wage or salary group with a tariff rate that is more than 20 percent below my current tariff rate.

I wish to be considered for continued employment outside the commuting area in a wage or salary group with a tariff rate that is lower than my current tariff rate.

(Please mark your selection for continued employment.)

As far as reasonably acceptable positions with a lower tariff rate than my current tariff rate are concerned, I wish to be considered for continued employment only in an available position with a monthly tariff rate of no less than \_\_\_\_\_ euros.

(Please enter the corresponding amount.)

If you wish to be considered for offers for continued employment outside the commuting area, you must select the location or locations from below list where you wish to be bindingly considered for available vacancies.

I am specifically interested in continued employment at the following location(s) that is (are) outside my commuting area:

- |  |   |                                       |                                      |
|--|---|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Ansbach       | <input type="checkbox"/> Gießen         | <input type="checkbox"/> Mainz-Kastel | <input type="checkbox"/> Spangdahlem |
| <input type="checkbox"/> Bamberg       | <input type="checkbox"/> Grafenwöhr     | <input type="checkbox"/> Mannheim     | <input type="checkbox"/> Stuttgart   |
| <input type="checkbox"/> Baumholder    | <input type="checkbox"/> Grünstadt      | <input type="checkbox"/> Miesau       | <input type="checkbox"/> Vilseck     |
| <input type="checkbox"/> Bremerhaven   | <input type="checkbox"/> Heidelberg     | <input type="checkbox"/> Oberammergau | <input type="checkbox"/> Wiesbaden   |
| <input type="checkbox"/> Frankfurt     | <input type="checkbox"/> Hohenfels      | <input type="checkbox"/> Pirmasens    |                                      |
| <input type="checkbox"/> Garmisch      | <input type="checkbox"/> Illesheim      | <input type="checkbox"/> Ramstein     |                                      |
| <input type="checkbox"/> Geilenkirchen | <input type="checkbox"/> Kaiserslautern | <input type="checkbox"/> Schweinfurt  |                                      |
| <input type="checkbox"/> Germersheim   | <input type="checkbox"/> Landstuhl      | <input type="checkbox"/> Sembach      |                                      |

Please mark your selected location or locations. If no location is selected, your request for continued employment outside the commuting area cannot be considered.

\_\_\_\_\_  
Place, Date

\_\_\_\_\_  
Signature