RECRUITMENT INCENTIVE

Request Worksheet

REGION MEDICAL

Selectee Name: MTF/Center:

Position Title: Directorate/Division:

Pay Plan: Series: Grade: Step: Department/Service/Branch:

Hiring Manager:

Email:

Annual Rate of Basic Pay \$

(including locality/special rate):

Telephone:

RPA # (if applicable):

Proposed Recruitment Incentive Amount

(up to 25% of annual rate of basic pay, including locality/special rate):

If any answer below is "No," a recruitment incentive cannot be approved.

- Has the position been designated as "hard to fill"?
 Is the position covered in one of the approved categories provided in 5 CFR 575.103?
 Is the incentive for a newly appointed employee or a former Federal employee with at least
 NO
- a 90 day break in service? (Ref 5 CFR 575.102)

 4. If the incentive is for a former Federal employee with a break in service, is the employee's YES NO
- most recent performance rating of record at least "Fully Successful" or equivalent?

 (Skip this question if the incentive is for a newly appointed employee)
- 5. Was determination based on one or more of the following factors, as applicable in the case YES NO at hand?
 - Factors Considered (Please select all that apply)

Candidate has special qualifications needed to meet mission requirements

Success of recent recruitment efforts involving similar positions

Significant differences in the Federal and non-Federal salaries for the skills and competencies required in the position to be filled Desirability of the duties, work or organization environment, or geographic location of the position

Recent turnover in the same or similar positions

Importance/criticality of the position to be filled and the effect on the agency or mission if the position is not filled

Attach Required Justification to this Request

Justification must include:

- Explanation of why the position is "hard to fill"
- Explanation of the above factors considered for the incentive

Resource Management	Nominating Supervisor		Second Level Approver (Optional)		Final Level Approver	
Approved Disapproved	Approved	Disapproved	Approved	Disapproved	Approved	Disapproved
Print	Print		Print		Print	
Name:	Name:		Name:		Name:	
Title/	Title/		Title/		Title/	
Rank:	Rank:		Rank:		Rank:	
Signature:	Signature:		Signature:		Signature:	