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MY LAST WORKING DAY WILL BE-

DATE SIGNED

SIGNATURE OF EMPLOYEE

FOFWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

INSTRUCTIONS

Irems 1 thru 7 and Items 9 thru 18a

The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains only to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

"Category of Employment" should show one of the following entries:

Regular Part Time Summer

WAE

Temporary

Detail Out Detail In

Consultant Military

Temporary-Part Time .

"Organizational Designations" should show all levels of organization pertinent to ing the location of the position:

Major Component (Director, Deputy Director, etc.)

Office, Major Staff, etc.

Foreign Field or U.S. Field (if pertinent)

Division or Staff (subordinate to first line)

Branch

Section

Unit

- Items 11 and 15 "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18-Remarks.
 - Item 18b Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, the gaining Career Service should approve and the other Career Service should concur in Item 18, Remarks.
- ROUTING- The original only of this form will be forwarded to the Office of Personnel through the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1, which require advance approval of or notification to the Office of Security or the Office of the Comptroller, one copy only will be sent to the Office(s) concerned.

