Statement of Prior Federal, Military and District Service (PLEASE READ THE FOLLOWING INFORMATION BEFORE COMPLETING THIS FORM)

Information about prior Federal and District civilian and military service is collected and maintained in your Official Personnel Folder (OPF). The information you furnish may be disclosed to other Federal and District agencies or Congressional or Judicial Offices in order to verify it or in connection with your application for job, license, grant, or other benefit. It may also be disclosed to a national, state, or local law enforcement agency where there is indication of a violation or potential violation of civil or criminal law or regulation, or to another Federal and District agency or court when the Government is party to a suit.

Furnishing this information is voluntary; however, failure to do so may result in you not receiving credit for prior Federal and District service.

I. What is Needed to Verify Prior Service

In order for your employing agency to credit your prior Federal and/or District service for benefits, such as leave accrual, the dates of your active uniformed service and the type(s) of appointment(s) and dates of civilian service must be verified. Dates of active uniformed service are verified from the records issued by the branch of service in which you served. Dates and types of appointments to civilian positions are usually verified from Notifications of Personnel Actions (Standard Form 50, Form One or CSC or OPM approved exceptions thereto), and payroll records (including records of deductions made under the Civil Service Retirement System-Standard Form 2806). The information on the application you submitted for the appointment you are receiving, along with the information on page 3 of this form, will be used by your agency to identify the Federal and/or District employers and periods of employment for which records must be obtained to verify the prior service.

When Notification of Personnel Action or payroll records cannot be located to verify a period of service, and the service was covered by Social Security, a detailed statement of earnings information (showing periods of employment and the name of the employer) from the Social Security Administration will be accepted as proof of service.

If no personnel, payroll, or Social Security records can be located, then your agency can accept secondary evidence of civilian employment, as explained below. When the secondary evidence you submit includes your affidavit regarding one or more periods of service, that affidavit should be made on page of this form.

II. Use of Secondary Evidence to Verify Federal and/or District Service

Secondary evidence may be considered as proof of Federal/District civilian service only when official Government records are lost, destroyed, or incomplete. Necessarily, the burden of proof is on the person claiming service that is not support by official records in the custody of the U.S. and/or District of Columbia Government. If you decide to claim credit for a period of service by submitting secondary evidence, it is important that you submit all documents in your possession that tend to prove you performed the service claimed, and that the service, if performed, was creditable for leave accrual and reduction-in-force purposes. No credit can be allowed for any service that is not substantiated by valid and conclusive secondary evidence. The following is applicable only if you are providing secondary evidence.

A. Documentary Evidence: Submit as many as possible of the documents listed in item 1 below. If your agency finds that these documents are insufficient to determine creditability, the documents listed in items 2 and 3 may be considered, but less weight will be given to such evidence.

1. Copies of official documents or letters about the service. These may be notices of appointment/separation; notices of changes in position/salary, organization, or headquarters, travel orders; payroll cards; ID's, etc.

2. Private records such as a diary, correspondence, copies of income tax returns, employment applications, credit applications, etc., that mention the Federal/District employer and the claimed service. Private records must have been made during or shortly after the period of service.

3. Any other documentary evidence tending to prove the service was actually performed and the staring and ending dates of the service.

B. Affidavit Evidence: If you are not able to supply copies of official documents (as described in item 1 above) that are sufficient for your agency to make a determination of creditability, you must submit affidavits from yourself and at least two other persons (preferably your supervisor who know the facts. If you can obtain no documentary evidence (item 1, 2, and 3 above) to support your claim, you may submit these affidavits only; however, your claim is more likely to be rejected without supporting documents. The required affidavits are from:

The employee, stating as many of the details on the affidavit form on page 2 as can accurately be remembered.

At least two persons knowing the facts. Each person should show that he or she is in a position to know the facts sworn to, and give his or her age and mailing address.

Affidavits must be sworn to or affirmed before a notary public or other officer who is authorized by law to administer oaths.

C. Warning: Any submission may be investigated. Intentional false statements, willful concealments, or using documents you know are false, fictitious, or fraudulent is punishable.

Statement of Prior Federal and/or District Service

PART 1-TO BE COMPLETED BY EMPLOYEE					1.0.00		<i>// / / / / / / / / / / / / / / / / / /</i>			
. Name (Last, First, Middle Initial)					2. Birt	hdate	(Month, I	Day, Ye	ear)	
. Does the application that you submitted, for the position to which you are	being	1	VEC /TE	"VEC" -	l Lack this k	Jack as	d the end add	a ha Than	- 0.)	
appointed, list all of your Federal/District government civilian and uniforme						theck this block and then skip to Item 8.)				
service, including beginning and ending dates, as well as the type of appo	intment	nent NO (If "NO", check thi					this block and complete Items 4-8)			
and work schedule for civilian service?										
. List below your prior civilian service (Include service with the D.C			n appoir	ntment	made be	fore Ja	nuary 1,	1980).		
	F	rom			To		Type of /	Appoint	ment and Wor	
	Year	Month	Day	Year	Month	Day	(Full-tim	ne, Part-	time or	
Name and Location of Agency			1				Intermi	ttent		
								1.1		
	· · .						8			
	1					e - 1				
				Ľ.				13		
. During periods of employment shown in Item 4, did you have a	total of r	nore that	an					ving inf	formation)	
6 months' absence without pay during any one calendar year?					(If "NO"	, go to				
Type if known (L.W.O.P, Furlough, suspensions, A.W. O. L. or Placement in Nonpay Status from seasonal or on-call employment)		MONTH	DAY	YEAR	TO MONTH	DAY	VEND	TOTAL		
in Norbey Status from Seasonal or off-call employment)	TEAR	THONTH	DAT	I CAK	MONTH	DAY	YEAR I	MONTH	DAYS	
× 1										
				3					-	
		-	l							
								2		
								10	1. State 1.	
		1		1			1 1			
			1						10.00	
								8	20-30 	
							-			
								2		
		-		-	- · ·			2		
List all uniformed service below. (List active service in any branc	h of the	Armed I	Forces ₄ c	of the Ur	nited Sta	tes; inc	os gnibut	tive du	ity as a	
servist and active service in the commissioned corps of the Public	Health s	Armed I Pervice o	Forces _y c	of the Ur Nationa	hited Sta al Oceani	tes; inc	duding ac	tive du eric Adr	ity as a ministration.	
servist and active service in the commissioned corps of the Public	Health s ryice.)	iervice a	Forces,c	of the Ur Nationa	al Oceani	tes; inc	Atmosphe I	eric Adı	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public	Health s rvice.) FR	iervice a	r of the	Nationa	al Oceani	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian se	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian se	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian se	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian se	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
List all uniformed service below. (List active service in any brance eservist and active service in the commissioned corps of the Public (so, list Merchant Marine service if it interrupted Federal civilian service) Branch	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian se	Health s rvice.) FR	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service Branch	Health s rvice.) FR Year	iervice o	r of the	Nationa	nl Oceani TO	ic and /	Atmosphe	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service Branch	Health s rvice.) FR Year	iervice o	r of the	Year	nl Oceani TO	Day	(Honora	eric Adı Dischar	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service Branch Do you claim any type of veteran preference, which has not been verified?	Health s rvice.) FR Year	iervice o	r of the	Year I dai	TO Month	Dav	Atmosphe (Honora	eric Adı Dischar ble or D	ministration.	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service Branch Do you claim any type of veteran preference, which has not been verified? No	Health s rvice.) FR Year	iervice o	r of the	Year Year I dai	TO Month Month m prefere	nce as t	Atmosphe (Honora he: d veterar	n	ministration. rge ishonorable)	
servist and active service in the commissioned corps of the Public so. list Merchant Marine service if it interrupted Federal civilian service Branch Do you claim any type of veteran preference, which has not been verified? No	Health s rvice.) FR Year	iervice o	r of the	Year Year I dai	TO Month Month m prefere	nce as t	Atmosphe (Honora	n	ministration. rge ishonorable)	
servist and active service in the commissioned corps of the Public so. list Merchant Marine service if it interrupted Federal civilian service Branch Do you claim any type of veteran preference, which has not been verified? No	Health s rvice.) FR Year	iervice o	r of the	Year Year I dai Spot	TO Month Month m prefere use of a cher of a c	nce as t disable	Atmosphe (Honora he: d veterar	n Dischar <u>ble or D</u>	ministration. rge <u>ishonorable)</u> eteran	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian service Branch Do you daim any type of veteran preference, which has not been verified? No Yes-Check one of the statements, if it applies to you)	Health s	OM Month	I Dav	Year Year I dai Spot Mott	TO Month Month m prefere use of a mer of a d	nce as t disable decease	Atmosphe (Honora he: d veterar ed or disa	n abled v	eteran eran	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian ser- Branch Do you claim any type of veteran preference, which has not been verified? No IYes-Check one of the statements, if it applies to you) Certification: The prior Federal civilian and uniformed service listed on m nolovment. I have no other Federal and/or District service for which I war	Health s rvice.) FR Year	COM Month Month	I Dav	Year Year I dai Spot Mott	TO Month Month m prefere use of a mer of a d	nce as t disable decease idow/w entire r	Atmosphe (Honora he: d veterar ed or disa vidower of F	n abled v <u>of a vet</u>	eteran eran end District	
servist and active service in the commissioned corps of the Public so, list Merchant Marine service if it interrupted Federal civilian ser- Branch Do you claim any type of veteran preference, which has not been verified? No lYes-Check one of the statements, if it applies to you) Certification: The prior Federal civilian and uniformed service listed on n	Health s rvice.) FR Year	COM Month Month	I Dav	Year Year I dai Spot Mott	TO Month Month m prefere use of a mer of a d	nce as t disable decease idow/w entire r	Atmosphe (Honora he: d veterar ed or disa	n abled v <u>of a vet</u>	eteran eran end District	

(E)