

US NAVY PERSONNEL SUPPORT ACTIVITY, FAR EAST

REQUEST FOR PERSONNEL ACTION

1. REQUESTING DEPARTMENT	2. DATE OF REQUEST
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3. ACTION REQUESTED BY	4. PROPOSED EFFECTIVE DATE
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5. PERSONNEL ACTION CHECKLIST

5a. FOR ALL PERSONNEL ACTIONS

REASON/JUSTIFICATION:

5b. FOR ALL RECRUITMENT ACTION

POSITION DESCRIPTION PROVIDED? YES NO
 KSA'S FOR POSITION PROVIDED? YES NO

RELOCATION EXPENSES PAID? YES NO

AREA OF CONSIDERATION:

5c. FOR TEMPORARY ACTION: DURATION:

SUPERVISOR CERTIFICATION THAT NEED IS TEMPORARY
 SUPERVISOR CERTIFICATION THAT POSITION NOT FILLED BY TEMP APPT FOR 24 OF PAST 36 MONTHS

5d. LWOP/RESIGNATION

EFFECTIVE DATE (MUST BE A WORKDAY):

FORWARDING ADDRESS SPONSOR'S ORDERS, IF APPLICABLE

6. POSITION INFORMATION

Name (Last, First, Middle)	Pay Plan	Occ.Code	Grade or Level	Step or Rate
Position Title and Number	UIC:		ORG CODE:	
Name And Location of Position's Organization				

7. Reviews and Approvals

	Signature	Date
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7a. ACTION REQUESTED BY:		
TITLE :		

7b. COMPTROLLER (CODE 40)		
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7c. RECOMMENDED BY:		
TITLE :		

7d. ACTION AUTHORIZED BY:		
TITLE :		

7e. ADMINISTRATIVE SUPPORT ASSISTANT (CODE 45)		
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8. Employee Resignation/Retirement (Employee will need to sign completed SF52 Action or provide a written/signed statement.)

Effective Date	Employee Signature	Date Signed	Forwarding Address (Number, Street, City, State, ZIP Code)
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9. Employee 's Resignation/Retirement Remarks (Employee must include copy of sponsor's PCS orders, if applicable.)

10. Remarks by Requesting Office

Note to Supervisors: Do you know of additional or conflicting reasons for the employee's resignation/retirement? YES NO
 If "YES", please state these facts on a separate sheet and attach to SF 52.)