U.S. DEPARTMENT AGRICULTURE RECOMMENDATION AND APPROVAL OF							
A RECRUITMENT / RELOCATION INCENTIVE							
1. AGENCY NAME			2. AGENCY CODE	3. CASE NO.	4. EMPLOYING OFFICE CODE		
5. NAME OF EMPLOYEE		6. SOCIAL SECURITY NO.		7. DUTY STATION CODES			
8. POSITION TITLE		9. LOCATION (City, State)		11. PAY PLAN - SERIES/ GRADE/ STEP			
12. SALARY	13. ORGANIZATION	13. ORGANIZATION		14. EFFECTIVE DATE			
15. ACCOUNTING CODE	16. MAIL CHECK TO	16. MAIL CHECK TO/METHOD OF PAYMENT( <i>If applicable</i> ):		17. EXPECTED DURATION OF ALLOWANCE ( <i>If applicable</i> ):			

THE FOLLOWING INFORMATION <u>MUST</u> BE ATTACHED, FOR REVIEW BY THE RECOMMENDING AND APPROVING OFFICIALS FOR A RECRUITMENT / RELOCATION INCENTIVE: (See DPM Chapter 575 Subchapter 1-5b for Guidance)

- A written justification outlining the difficulty experienced or expected in filling the position if incentive is not used.
- The proposed recruitment / relocation amount, along with the rationale for the amount proposed.

## THE FOLLOWING INFORMATION <u>MUST</u> BE ATTACHED, FOR REVIEW BY THE RECOMMENDING AND APPROVING OFFICIALS FOR A RETENTION INCENTIVE: (See DPM Chapter 575, Subchapter 2-5c for Guidance)

- A written determination that unusually high or unique qualifications of the employee or a special need of the agency
- A written determination that the employee is likely to leave the federal government in the absence of a retention incentive.
- A written description of the extent to which the employee's departure would affect the agency.

18. RECOMMENDATION					
RECOMMENDED AMOUNT	PERCENTAGE OF SALARY				
\$					
SIGNATURE OF RECOMMENDING OFFICIAL	TITLE	DATE			
19. APPROVAL					
APPROVED AMOUNT	PERCENTAGE OF SALARY				
\$					
SIGNATURE OF APPROVING OFFICIAL	TITLE	DATE			
20. RECERTIFICATION (Fo	r Retention Incentives/GroupRecruitment Incen	tives Only)			
SIGNATURE OF RECOMMENDING OFFICIAL	TITLE	DATE			
Comments / changes:					

SIGNATURE OF APPROVING OFFICIAL	TITLE	DATE
Comments / changes		<i></i>