

Chapter 330.201a (Reduction-In-Force)
Subpart B - Establishment of the Reemployment Priority List

Register () Update () Delete ()	USDA Reemployment Priority List (RPL) Registration Sheet
--	---

1. Name of Servicing Mission Area Personnel Office _____
 Address _____
 Telephone _____ **Registrant's Agency** _____

2. Name of Registrant (Last) _____ (First) _____ (Middle) _____

3. Address Registrant (Street) _____ (City) _____ (State) _____ (Zip Code) _____
 Telephone Number of Registrant () _____

4. Tenure Group (More than One Year) (Less than One Year) Career or Career-Conditional Career-Conditional serving probationary period () 1AD () 2AD () 1A () 2A () 1B () 2B	5. Date of Separation Month Date Year _____	6. Work Schedule () FT () PT - __ hrs. per pay period () Intermittent () Seasonal
--	--	--

7. Available for temporary appointment () Yes () No
Available for 90 days or less appointment () Yes () No

8. Series Qualification

	Pay Plan	Series	Highest Grade Eligibility	Lowest Grade Acceptable
Present Series	_____	_____	_____	_____
Series 2	_____	_____	_____	_____
Series 3	_____	_____	_____	_____
Series 4	_____	_____	_____	_____
Series 5	_____	_____	_____	_____
Series 6	_____	_____	_____	_____

(Registration grade eligibility - no more than three grades below the position released from, except for preference eligibles with compensable service-connected disability of 30 percent or more limit is five grades.)

(Attach blank sheet to continue series qualification for registrant)

9. Commuting area (including designated subareas within commuting area) from which displaced. State Abbrev.: _____ City: _____ City Code: _____	10. Reasons for Registration () Reduction-In-Force () Returned from Military () Recovered compensable injury or disability
---	---

11. To be completed by Employing Office when the registrant is being removed from RPL
 Name of Employing Office _____
 Reason for Removal:
 () Appointment (Attach the Agency, type of appointment, work schedule)
 () Registrant's Written Request (Attach the written request)
 () Declination and Reasons (Attach the declinations and/or reasons)

12. Registrant Signature _____ **Date** _____
Appointing Officer _____ **Date** _____