

U.S. Department of Energy

Oak Ridge Operations

ORO O 320 Chapter II

DATE: 09-30-96

SUBJECT: PROCESSING PERSONNEL ACTIONS

1. PURPOSE. This Chapter assigns responsibility and accountability and provides administrative guidance to Oak Ridge Operations (ORO) and Office of Scientific and Technical Information (OSTI) for processing personnel actions. Nothing in this issuance changes any requirements contained in any DOE Order.
2. CANCELLATION. This Chapter cancels and replaces OR 3296.1A, PROCESSING PERSONNEL ACTIONS, dated January 5, 1989.
3. APPLICABILITY. The provisions of this Chapter apply to all ORO and OSTI requests for personnel and/or position actions.
4. RESPONSIBILITIES.
 - a. Supervisors and Managers initiate personnel and/or position actions in accordance with paragraph 5 of this Chapter.
 - b. Director, Personnel Division, completes the processing of personnel and/or position actions in accordance with The Guide to Processing Personnel Actions, the DOE PAY/PERS Personnel On-Line Users Guide, and standard operating procedures.
5. REQUIREMENTS AND PROCEDURES.
 - a. SF-52, "Request for Personnel Action." Each requesting office consults with the appropriate Personnel Management Specialist, completes the following items as appropriate to the personnel and/or position action requested, and submits the SF-52 to the Personnel Division along with any other required documentation, (e.g., position descriptions for new jobs).
 - (1) Part A.
 - (a) Item 1. Fill in the type of personnel and/or position action(s) requested (e.g., recruitment, promotion, reassignment, establish position, redescribe position, etc.).
 - (b) Item 2. (Optional.) If desired, the originating office may insert a request number to assist in tracking personnel actions.
 - (c) Item 3. Provide the name and telephone number of the employee or supervisor most knowledgeable about the details of the request.
 - (d) Item 4. (Optional.) If desired, a proposed effective date of the personnel action may be specified. The letters ASAP may also be used or the field may be left blank.

- (e) Item 5. Use this block for the signature of the individual requesting the action.
 - (f) Item 6. This block must be signed by the immediate supervisor or other responsible individual with line authority over the affected employee and/or the position.
- (2) Part B. The requesting office need only complete Item 1 by filling in the name of the employee. All other items will be completed by the Personnel and Management Analysis Branch, Personnel Division (PMAB).
 - (3) Part C. This part is to be completed by the PMAB.
 - (4) Part D. This part is to be used by the requesting office for any remarks, explanatory material, or specific instructions which will facilitate the processing of the request.
 - (5) Part E. This part is to be used only if the action is a resignation or retirement. The employee shall fill in the reasons for the separation and give a forwarding address.
 - (6) Part F. This part is reserved for use of the PMAB for documenting remarks to be used on the SF-50, "Notification of Personnel Action."
- b. Position Description (PD).
 - (1) Form OR F 3511.1. Completion of blocks 1, 2, 3, and 4 of this form is required of the requesting office. Instructions for completing and using this form and format are contained in ORO O 320, Chapter IX, POSITION CLASSIFICATION.
 - (2) Written Descriptions. Four copies of the applicable PD shall be submitted with the SF-52.
6. REFERENCES.
- a. Office of Personnel Management, THE GUIDE TO PROCESSING PERSONNEL ACTIONS, which provides specific codes, procedures, and instructions for processing personnel actions.
 - b. DOE PAY/PERS PERSONNEL ON-LINE USERS GUIDE, which provides instructions for using the DOE computerized system for processing personnel actions.
 - c. ORO O 320, Chapter VII, MERIT PROMOTION, dated September 30, 1996, which establishes procedures for rating and ranking candidates for promotion and placement, and exceptions when competitive procedures need not be used.
 - d. ORO O 320, Chapter IX, POSITION CLASSIFICATION, dated September 30, 1996, which prescribes policies, responsibilities, and procedures for describing and classifying positions within ORO and OSTI.

7. DEFINITIONS. None.
8. CONTRACTOR REQUIREMENTS DOCUMENT. None.
9. ATTACHMENT. Sample Standard Form 52.

Standard Form 52
Rev. 7/91
U.S. Office of Personnel Management
FPM Supp. 296-33, Subch. 3

REQUEST FOR PERSONNEL ACTION

PART A - Requesting Office (Also complete Part B, Items 1, 7-22, 32, 33, 36 and 39.)

1. Actions Requested	2. Request Number
3. For Additional Information Call (Name and Telephone Number)	4. Proposed Effective Date
5. Action Requested By (Typed Name, Title, Signature, and Request Date)	6. Action Authorized By (Typed Name, Title, Signature, and Concurrence Date)

PART B - For Preparation of SF 50 (Use only codes in FPM Supplement 292-1. Show all dates in month-day-year order.)

1. Name (Last, First, Middle)	2. Social Security Number	3. Date of Birth	4. Effective Date
FIRST ACTION		SECOND ACTION	
5-A. Code	5-B. Nature of Action	6-A. Code	6-B. Nature of Action
5-C. Code	5-D. Legal Authority	6-C. Code	6-D. Legal Authority
5-E. Code	5-F. Legal Authority	6-E. Code	6-F. Legal Authority

7. FROM: Position Title and Number	15. TO: Position Title and Number										
8. Pay Plan	9. Occ. Code	10. Grade or Level	11. Step or Rate	12. Total Salary	13. Pay Basis	16. Pay Plan	17. Occ. Code	18. Grade or Level	19. Step or Rate	20. Total Salary/Award	21. Pay Basis
12A. Basic Pay	12B. Locality Adj.	12C. Adj. Basic Pay	12D. Other Pay	20A. Basic Pay	20B. Locality Adj.	20C. Adj. Basic Pay	20D. Other Pay				
14. Name and Location of Position's Organization	22. Name and Location of Position's Organization										

EMPLOYEE DATA

23. Veterans Preference	24. Tenure	25. Agency Use	26. Veterans Preference for RIF
1 - None 2 - 5-Point 3 - 10-Point/Disability 4 - 10-Point/Compensable 5 - 10-Point/Other 6 - 10-Point/Compensable/30%	0 - None 1 - Permanent 2 - Conditional 3 - Indefinite		YES NO
27. FEGLI	28. Annuitant Indicator	29. Pay Rate Determinant	
30. Retirement Plan	31. Service Comp. Date (Leave)	32. Work Schedule	33. Part-Time Hours Per Biweekly Pay Period
POSITION DATA			
34. Position Occupied	35. FLSA Category	36. Appropriation Code	37. Bargaining Unit Status
1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserved E - Exempt N - Nonexempt			
38. Duty Station Code	39. Duty Station (City - County - State or Overseas Location)		

40. Agency Data	41.	42.	43.	44.		
45. Educational Level:	46. Year Degree Attained	47. Academic Discipline	48. Functional Class	49. Citizenship	50. Veterans Status	51. Supervisory Status
				1 - USA 8 - Other		

PART C - Reviews and Approvals (Not to be used by requesting office.)

1. Office/Function	Initials/Signature	Date	Office/Function	Initials/Signature	Date
A.			D.		
B.			E.		
C.			F.		
2. Approval: I certify that the information entered on this form is accurate and that the proposed action is in compliance with statutory and regulatory requirements.			Signature	Approval Date	

PART D - Remarks by Requesting Office

(Note to Supervisors: Do you know of additional or conflicting reasons for the employee's resignation/retirement?
If "YES", please state these facts on a separate sheet and attach to SF 52.)

YES NO

PART E - Employee Resignation/Retirement

Privacy Act Statement

You are requested to furnish a specific reason for your resignation or retirement and a forwarding address. Your reason may be considered in any future decision regarding your re-employment in the Federal service and may also be used to determine your eligibility for unemployment compensation benefits. Your forwarding address will be used primarily to mail you copies of any documents you should have or any pay or compensation to which you are entitled.

This information is requested under authority of sections 301, 3301, and 8506 of title 5, U.S. Code. Sections 301 and 3301 authorize OPM and agencies to issue

regulations with regard to employment of individuals in the Federal service and their records, while section 8506 requires agencies to furnish the specific reason for termination of Federal service to the Secretary of Labor or a State agency in connection with administration of unemployment compensation programs.

The furnishing of this information is voluntary; however, failure to provide it may result in your not receiving: (1) your copies of those documents you should have; (2) pay or other compensation due you; and (3) any unemployment compensation benefits to which you may be entitled.

1. Reasons for Resignation/Retirement (NOTE: Your reasons are used in determining possible unemployment benefits. Please be specific and avoid generalizations. Your resignation/retirement is effective at the end of the day - midnight - unless you specify otherwise.)

2. Effective Date	3. Your Signature	4. Date Signed	5. Forwarding Address (Number, Street, City, State, ZIP Code)
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PART F - Remarks for SF 50