

Request for Promotion Consideration and Acknowledgement

INFORMATION • Part IV will be dated, detached, and returned to you to acknowledge receipt of your application.
 • Part V will be returned to you when action on your application has been completed.

INSTRUCTIONS • Please type or print.
 • Complete Parts, I, III and IV of this form and attach it to your application.
 • A separate form and application must be submitted for each vacancy and location for which you request consideration.

PART I. Request for Promotion Consideration to: _____
(See vacancy announcement to find where application is to be sent.)

I wish to be considered for Position Vacancy No. _____ at _____
(Location)

Title, Series, Grade of Vacancy _____

NAME _____

TITLE/GRADE _____

DUTY _____

LOCATION _____

Date

Signature

| PART II: For use by personnel office ONLY | |
|---|--|
| ELIGIBLE Referred <input type="checkbox"/> Not Referred <input type="checkbox"/> | INELIGIBLE BECAUSE TIME IN GRADE <input type="checkbox"/> DOES NOT MEET QUALIFICATION REQUIREMENTS <input type="checkbox"/> OTHER <input type="checkbox"/> |

PART III. TO BE COMPLETED BY EMPLOYEE: *(To be used to notify you of the results of your application. Use correct home/office/facility mailing address or headquarters routing symbol)*

Voluntary Application _____
(Title, Series and Grade)

Vacancy Number _____

Location/Region _____

Enter Name and Routing Symbol or Address below

PART IV. TO BE COMPLETED BY EMPLOYEE: *(This part will be returned to acknowledge receipt of your application. Use correct home/office/facility or headquarters routing symbol.)*

Voluntary Application _____
(Title, Series and Grade)

Vacancy Number _____

Location/Region _____

Enter Name and Routing Symbol or Address below

 _____ (Date received)

| | |
|---|--|
| PART V. This portion will be completed by the office processing the vacancy announcement. | |
| To the Employee: You were found to be: | |
| Eligible | Ineligible |
| <input type="checkbox"/> Placed on Selection List <input type="checkbox"/> Not placed on Selection List <i>(Did not fall in Best Qualified Group)</i> | <input type="checkbox"/> You did not meet the announcement requirements. <input type="checkbox"/> You did not meet time-in-grade requirements <i>(FPM Ch. 300)</i> <input type="checkbox"/> You are outside the area of consideration. <input type="checkbox"/> Your application was not submitted within required time limits. |
| Vacancy Announcement | Other |
| <input type="checkbox"/> Cancelled <input type="checkbox"/> Expired | <input type="checkbox"/> |

Privacy Act Information. This form is used to advise the candidate about the status of his/her application. It is authorized under Title 5 of the U.S. Code, Section 3302 and 3361. The information will be used for FAA personnel management related purposes and will not be transmitted outside the agency except as provided by law. This form must be accurately completed in order for the candidate to get a receipt of his/her application and to be advised when action on the application has been completed.