ECI: 2335438

SF 52 (E-Forms 4.4)
Rev. 7/91
U.S. Office of Personnel Management
FPM Supp. 296-33, Subch. 3

SRO Approval John E Reeder

REQUEST FOR PERSONNEL ACTION

1. Actions Requested: NON CAREER SES	2. Request Number: IO-2017-099
3. For Additional Information Call (Name and Telephone Number): Felicia Peppins (HR- Howard Barnett) Local Tracking No:	4. Proposed Effective Date: 06/12/2017
5. Action Requested By (Typed Name, Title, Signature, and Request Date): Ryan Jackson Chief of Staff	6. Action Authorized By (Typed Name, Title, Signature, and Concurrence Date): E. Scott Pruitt, Administrator, EPA
1. Name: Darwin, Henry	2. Social Security Number: (b) (6) 3. Date of Birth: 4. Effective Date: 07-10-17

5-A. Code	5-B. Nature of Action	6-A. Code	6-B. Nature of Action
146	SES Non-Career Appt		
5-C. Code	5-D. Legal Authority	6-C. Code	6-D. Legal Authority
V4L	5 U.S.C. 3394(a) Noncareer and		
5-E. Code	5-F. Legal Authority	6-E. Code	6-F. Legal Authority
AWM	OPM Form 1652		

7. FROM: Position Title and Number	15. TO: Position Title and Number: 17019 Assistant Deputy Administrator

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
						ES	0340	00	00	$179,700	PA

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
	A0000000 - US EPA, Office of the Administrator, Immediate Office

23. Veterans Preference: (b) (6) 1 - None 3 - 10-Point/Disability 5 - 10-Point/Other 2 - 5-Point 4 - 10-Point/Compensable 6 - 10-Point/Compensable/30%

24. Tenure: 0 (0 - None, 1 - Permanent, 2 - Conditional, 3 - Indefinite)

25. Agency Use:

26. Veterans Preference: (b) (6)

27. FEGLI: (b) (6)

28. Annuitant Indicator: 9

29. Pay Rate Determinant: 0

30. Retirement Plan: KF

31. Service Comp. Date (Leave): (b) (6)

32. Work Schedule: F

33. Part Time Hours Per Biweekly Pay Period: 00

34. Position Occupied: 1 - Competitive Service 3 - SES General 2 - Excepted Service 4 - SES Career Reserved

35. FLSA Category: E

36. Appropriation Code: 2017 2018 B 11A ZZZME8

37. Bargaining Unit Status: 8888

38. Duty Station Code: 11-0010-001

39. Duty Station: Washington, DC 20460

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
15	1996	220101	—	1 (1 - USA, 8 - Other)	(b) (6)	S

1. Office/Function	Initials/Signature	Date	Office/Function	Initials/Signature	Date
A.			D. Staff	Ryan Jackson	07-10-17
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: Ryan Jackson

Approval Date: 07-10-17

CONTINUED ON NEXT PAGE

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

__ OGE 450 Not Required

__ OGE 450 Required

Signed: _____, DEO

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)*

PART F - Remarks for SF 50

M01: Appointment Affidavit executed: 07-10-17.

M39: Creditable Military Service: (b) (6) [redacted]

M40: Previous Retirement Coverage: (b) (6) [redacted].

M45: Employee is automatically covered under FERS.

M38: FROZEN SERVICE: 00 03

T55: Tenure as used for U. S. C. is not applicable to the Senior Executive Service.

ZZZ: This position is designated for Drug Testing.