

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

6 May 1971

1. SERIAL NUMBER	2. NAME (Last-First-Middle)
	COLLINS, Charles P.

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE REQUESTED	5. CATEGORY OF EMPLOYMENT
* RESIGNATION	MONTH 05 DAY 28 YEAR 71	REGULAR

6. FUNDS	7. FINANCIAL ANALYSIS NO. CHARGEABLE	8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DEPUTY DIRECTOR (SCIENCE & TECHNOLOGY) OFFICE OF COMPUTER SERVICES	WASHINGTON, D. C.

11. POSITION TITLE	12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION
IO GENERAL		

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS		16 8	\$ 34,695

18. REMARKS
 * This resignation is submitted pursuant to a request from the Executive Director-Comptroller.

APPROVED FOR RELEASE
DATE: DEC 2007

Subject's LWD: 28 May 1971

CONCUR: [Signature] 5/13/71

DATE SIGNED	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	DATE SIGNED
Personnel Officer, OCS	John D. Iams Director, Computer Services	7 MAY 1971

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY. CODE	21. OFFICE CODING	22. STATION CODE	23. CODE	24. HDQTRS. CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
		NUMERIC ALPHABETIC				MO. DA. YR.	MO. DA. YR.	MO. DA. YR.
						1 12 28 16		
28. NTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SECURITY REQ. NO.	34. SEX	EOD DATA	
MO. DA. YR.		1-CSC 2-ORGN 3-FICA 5-NONE						
35. VET. PREFERENCE	36. SERV. COMP. DATE	37. LONG. COMP. DATE	38. CAREER CATEGORY	39. FEGLI/HEALTH INSURANCE	40. SOCIAL SECURITY NO.			
CODE 0-NONE 1-5 PT. 2-10 PT.	MO. DA. YR.	MO. DA. YR.	CAR/RESV PROV/TEMP	CODE 0-WAIVER 1-YES				
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT. CODE	43. FEDERAL TAX DATA		44. STATE TAX DATA				
CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		FORM EXECUTED	CODE NO. TAX EXEMPTIONS	FORM EXECUTED	CODE NO. TAX EXEMP.	STATE CODE		
		1-YES 2-NO		1-YES 2-NO				
45. POSITION CONTROL CERTIFICATION	46. O.P. APPROVAL			DATE APPROVED				
5-24-71	[Signature]			20 May 71				

~~SECRET~~
(When Filled In)

EMPLOYEE NOTICE OF RESIGNATION

RESIGN EFFECTIVE 28 May 1971 FOR THE FOLLOWING REASON:
(Date)

This resignation is submitted pursuant to a request from the Executive Director-Comptroller.

MY LAST WORKING DAY WILL BE—

28 May 1971

DATE SIGNED

6 May 1971

SIGNATURE OF EMPLOYEE

Charles P. Williams

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

142 Pawkannawkut Drive, Bass River, Cape Cod, Mass. 02664

PERSONAL AFFAIRS
BRANCH
MAY 24 5 02 PM '71
OFFICE OF
PERSONNEL

INSTRUCTIONS

Items 1 thru 7
and
Items 9 thru 18a

The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains *only* to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 — "Category of Employment" should show one of the following entries:

Regular	Summer	WAE
Part Time	Detail Out	Consultant
Temporary	Detail In	Military
Temporary-Part Time		

PERSONAL AFFAIRS
BRANCH
MAY 14 5 50 PM '71
OFFICE OF
PERSONNEL

Item 9 — "Organizational Designations" should show *all* levels of organization pertinent to identifying the location of the position:

FIRST LINE Major Component (*Director, Deputy Director, etc.*)
 Office, Major Staff, etc.
 Foreign Field or U.S. Field (*if pertinent*)
 Division or Staff (*subordinate to first line*)
 Branch
 Section
 Unit

Items 11 and 15 — "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18—Remarks.

Item 18b — Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, *the gaining Career Service should approve* and the other Career Service should concur in Item 18, Remarks.

ROUTING— The original only of this form will be forwarded to the Office of Personnel through the appropriate Career Service official(s). In the case of requests specified in which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.

~~SECRET~~