

FSA-334

(10-20-11)

**U.S. DEPARTMENT OF AGRICULTURE
FARM SERVICE AGENCY**

FSA APPLICATION TO RETIRE OR RESIGN WITH VOLUNTARY SEPARATION INCENTIVE PAYMENT (VSIP)

**APPLICATION MUST BE SUBMITTED BY 11:59 pm EASTERN TIME
ON THE LAST DAY OF THE APPLICATION WINDOW**

1. NAME (Last, First, Middle Initial)	2A. PAY PLAN (Check one below) Federal Employee : GS ☐ GM ☐ WG ☐ County Employee (Non-Federal) - CO ☐	2B. SERIES (4 Digits)	2C. GRADE (2 Digits)
3. LAST 4 DIGITS OF EMPLOYEE'S SOCIAL SECURITY NO.			
4. HOME ADDRESS (Include Zip Code)	5. OFFICIAL POSITION TITLE		
6A. OFFICE (Include Division, Branch and Section OR State or County Office Name as applicable)	6B. IS YOUR DUTY STATION IN AN FSA COUNTY OFFICE? (Check "YES" or "NO" box below) ☐ YES ☐ NO	7A. DUTY STATION STATE	
		7B. DUTY STATION CITY	
8A. OFFICE E-MAIL ADDRESS	8B. ALTERNATE E-MAIL ADDRESS		
9A. HOME PHONE (Include Area Code)	9B. OFFICE PHONE (Include Area Code)	9C. FAX NO. (Include Area Code)	

10. METHOD OF SEPARATION (Type of Application - Check only one)

☐ Early Retirement (VERA) with Buyout ☐ Optional Retirement with Buyout ☐ Resignation with Buyout

I hereby request to retire or resign WITH a voluntary separation incentive payment and an effective separation date between **November 30, 2011 and December 3, 2011**. My proposed separation date (e.g. 11-30-2011) is: _____

11. APPLICANT ELIGIBILITY ACKNOWLEDGEMENTS

☐ YES ☐ NO As of April 6, 2011, I was officially a permanent employee and I occupy a position referenced in Notice PM-2830, Exhibit 1 or 2.

☐ YES ☐ NO I have met the age and service requirement for optional retirement.

☐ YES ☐ NO I have met the age and service requirement for early retirement and request to retire under Voluntary Early Retirement Authority (VERA).

☐ YES ☐ NO I have prior Military service that I am currently buying back.

☐ YES ☐ NO I wish to resign.

FOR HRD USE ONLY: Date Application received: _____ / _____ / 2011
(month) (day)

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12. Applicant's Name (*Last, First, Middle Initial*)

Statement of Understanding If Applying for Optional or Early Retirement:

My decision to retire is entirely voluntary and has not been coerced.

By signing this document you are acknowledging you have read and understand the terms and conditions of this application and have notified your supervisor of your intent to apply.

I understand that the basic requirements for early retirement is that I (1) must meet basic early retirement eligibility—50 years of age and 20 years of service or 25 years of service and any age; (2) must have been continuously on the agency's rolls since **April 6, 2011** (this is 30 days prior to the date of the agency's application for VERA authority, as required by OPM); (3) cannot be serving under a time-limited appointment; (4) cannot be in receipt of a decision notice of involuntary separation for misconduct or unsatisfactory performance; and (5) cannot be serving in an occupation for which USDA has direct hire authority—refer to Notice PM-2830.

I understand that I cannot use annual leave to establish retirement eligibility (for early or optional retirement).

Statement of Understanding If Applying for Buyout:

I understand that the basic eligibility requirements to apply for VSIP or buyout is that I (1) must be currently employed by the Federal government for a continuous period of 3 years; (2) must have an appointment without a time limit; (3) cannot be eligible for disability retirement; (4) cannot be a reemployed annuitant; (5) cannot be currently approved for a delayed buyout under previous law; (6) cannot be in receipt of a decision notice of involuntary separation for misconduct or unacceptable performance; (7) cannot have previously received a buyout from any Federal agency; (8) cannot have received a student loan repayment during the 36-month period preceding the date of separation; (9) cannot have received a recruitment or relocation bonus during the 24-month period preceding the separation or a retention bonus during the 12-month period preceding the separation; and (10) cannot be covered by statutory reemployment rights while on transfer to another organization.

I further understand that there is no guarantee that my application for a VSIP will be approved.

In order to receive a VSIP, I further understand that, if I am selected, I agree to separate on or after **November 30, 2011** but not later than **December 3, 2011**.

The separation incentive will be computed using applicable severance pay rules and will be either the lower of \$25,000 or an amount using the severance pay computation based on my salary, age, years of civilian service, and work schedule if less than full time.

My decision to resign or retire is entirely voluntary and has not been coerced.

I understand that my eligibility for a separation incentive payment **depends on meeting the requirements established for Early out/Buyout Plan** and that I will be informed of the approval or disapproval of this request. I further understand that this statement serves as my commitment to resign or retire if the separation incentive is approved.

By accepting this incentive payment, I understand that I will be responsible for repaying the entire incentive payment to my agency if I am reemployed anywhere in the Federal Government either in a temporary or permanent status or under a direct or personal services contract within a period of 5 years following the effective date of my separation.

I understand that my employing Agency is under no obligation to pay me a VSIP until I actually separate by retirement or by resignation in accordance with this agreement. I understand that management retains the right to approve and/or cancel this agreement based on my employing Agency's financial considerations or mission delivery needs.

If I decide to revise this request, I will check the appropriate box in Item 13B and submit to HRD. If I decide to withdraw this request, I will sign and date Items 14A and 14B and submit to HRD.

13A. Signature

13B. Request

☐ New

☐ Revised

13C. Date (MM-DD-YYYY)

ONLY SIGN BELOW IF YOU WISH TO WITHDRAW YOUR REQUEST FOR RETIREMENT OR RESIGNATION WITH BUYOUT. SCAN AND SUBMIT YOUR WITHDRAWAL VIA E-MAIL TO: 2012-FSA-VERA-VSIP-APPLIC@wdc.usda.gov utilizing your official work e-mail account.

14. I wish to withdraw this application:

14A. Signature

14B. Date (MM-DD-YYYY)