

STANDARD FORM 144
REVISED SEPTEMBER 1954
U. S. CIVIL SERVICE COMMISSION
FFM CHAPTERS L1, R3, AND S2

**STATEMENT OF PRIOR FEDERAL CIVIL AND MILITARY SERVICE
AND DETERMINATION OF COMPETITIVE STATUS**

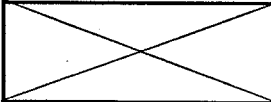
IMPORTANT: The information on this form will be used (1) in determining creditable service for leave purposes and retention credits for reduction in force, and (2) in recording agency determination of competitive status. The employee should complete Part I and the Personnel Office should complete Parts II through V.

| PART I.—EMPLOYEE'S STATEMENT | | | | | | | PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE | | | |
|---|--------------------------------|------------|-----------|---|------------|-----------|--|-------------|----------|-----------|
| 1. NAME (Last, first, middle initial) <i>Vincent, Edele F.</i> | | | | 2. DATE OF BIRTH <i>May 31, 1908</i> | | | 9. RETENTION GROUP | | | |
| 3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENT (Do not include military service.) | | | | | | | 10. A. CSC STATUS <input type="checkbox"/> YES <input type="checkbox"/> NO B. TYPE OF PRESENT APPOINTMENT | | | |
| NAME AND LOCATION OF AGENCY | FROM— | | | TO— | | | TYPE OF APPOINTMENT IF KNOWN | 11. SERVICE | | |
| | YEAR | MONTH | DAY | YEAR | MONTH | DAY | | YEAR | MONTH | DAY |
| <i>Dept. of Justice 10th + Penn. Ave Wash., D.C.</i> | 1945 <i>1949</i> | <i>May</i> | <i>22</i> | <i>1957</i> | <i>Nov</i> | <i>16</i> | <i>Clerical</i> <i>Sec D</i> <i>4 May 1949</i> | <i>1949</i> | <i>6</i> | <i>15</i> |
| 4. LIST PERIODS OF ACTIVE SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO ACTIVE MILITARY SERVICE, WRITE "NONE." <i>None</i> | | | | | | | | | | |
| BRANCH | FROM— | | | TO— | | | DISCHARGE (Hon. or dishon.?) | | | |
| | YEAR | MONTH | DAY | YEAR | MONTH | DAY | | | | |
| 5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS "YES," LIST FOLLOWING INFORMATION. | | | | | | | | | | |
| TYPE IF KNOWN (LWOP, Furl, Susp, AWOL, Mer Mar) | FROM— | | | TO— | | | TOTAL | | | |
| | YEAR | MONTH | DAY | YEAR | MONTH | DAY | YEARS | MONTHS | DAYS | |
| | | | | | | | 12. TOTAL SERVICE <i>8 6 15</i> | | | |
| | | | | | | | 13. NONCREDITABLE SERVICE (Leave purposes only): | | | |
| | | | | | | | 14. NONCREDITABLE SERVICE (RIF purposes only): | | | |
| 6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If answer is "Yes," in what agency were you employed at the time status was acquired?) <i>Dept of Justice</i> | | | | | | | | | | |
| 7. ARE YOU: A. THE WIFE OF A DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO C. THE UNREMARKED WIDOW OF A VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | | | | | | | | | |
| 8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS. I swear (or affirm) that the above statements are true to the best of my knowledge and belief. <i>11/18/57</i> (DATE) <i>Edele F. Vincent</i> (SIGNATURE) Subscribed and sworn to before me on this <i>18th</i> day of <i>November</i> <i>57</i> at <i>Washington, D.C.</i> (STATE) | | | | | | | | | | |
| S E A L | | | | | | | | | | |
| NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be _____ n. | | | | | | | | | | |
| INSTRUCTIONS: File this form on the permanent side of the employee's official personnel folder immediately before or after the personnel action involved. | | | | | | | | | | |

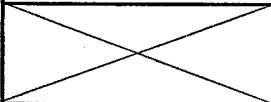
Part III.—DETERMINATION OF COMPETITIVE STATUS. (Complete for noncompetitive hires based on competitive status as required by instructions in FPM Chapter S2.) Employee has a competitive status. This determination is based upon the following evidence:

| NAME OF AGENCY | SIGNATURE AND OFFICIAL TITLE | DATE |
|----------------|------------------------------|------|
| | | |
| | | |
| | | |
| | | |

PART IV.—DETERMINATION OF CREDITABLE SERVICE AND SERVICE COMPUTATION DATE FOR LEAVE PURPOSES

|  | TOTAL SERVICE (Item 12) | NONCREDITABLE SERVICE (Item 13) | CREDITABLE SERVICE (Leave Purposes) | ENTRANCE ON DUTY DATE (Present Agency) | LESS CREDITABLE SERVICE (Leave Purposes) | SERVICE COMPUTATION DATE (Leave Purposes) |
|---|----------------------------|------------------------------------|--|---|---|--|
| Years | | | | 57 | | |
| Months | | | | 11 | | |
| Days | | | | 18 | | |

PART V.—DETERMINATION OF CREDITABLE SERVICE AND SERVICE COMPUTATION DATE FOR REDUCTION IN FORCE PURPOSES. (Complete only in those cases when the amount of creditable service for reduction in force purposes differs from the amount creditable for leave purposes.)

|  | TOTAL SERVICE (Item 12) | NONCREDITABLE SERVICE (Item 14) | CREDITABLE SERVICE (RIF Purposes) | ENTRANCE ON DUTY DATE (Present Agency) | LESS CREDITABLE SERVICE (RIF Purposes) | SERVICE COMPUTATION DATE* (RIF Purposes) |
|--|----------------------------|------------------------------------|--------------------------------------|---|---|---|
| Years | | | | | | |
| Months | | | | | | |
| Days | | | | | | |

* Enter as the "Service Computation Date" on the employee's "Service Record Card," SF 7

REMARKS: