

**NOTIFICATION OF PERSONNEL ACTION**

1. Name (Last, First, Middle) <b>LOYD, AMY LIZANNE</b>				2. Social Security Number <b>(b)(6)</b>		3. Date of Birth <b>(b)(6)</b>		4. Effective Date <b>04/05/2021</b>			
<b>FIRST ACTION</b>					<b>SECOND ACTION</b>						
5-A. Code <b>146</b>		5-B. Nature of Action <b>SES NON-CAREER APPT</b>			6-A. Code		6-B. Nature of Action				
5-C. Code <b>V4L</b>		5-D. Legal Authority <b>5 U.S.C. 3394(A) NONCAREER</b>			6-C. Code		6-D. Legal Authority				
5-E. Code <b>AWM</b>		5-F. Legal Authority <b>OPM FORM 1652 DATED 04/01/21</b>			6-E. Code		6-F. Legal Authority				
7. FROM: Position Title and Number					15. TO: Position Title and Number <b>DEPUTY ASSISTANT SECRETARY</b>						
					<b>EV ES03571</b>						
8. Pay Plan <b>ES</b>		9. Occ. Code <b>0301</b>	10. Grade or Level <b>00</b>	11. Step or Rate <b>00</b>	12. Total Salary <b>\$183100.00</b>		13. Pay Basis <b>PA</b>				
12A. Basic Pay <b>\$183100.00</b>		12B. Locality Adj. <b>\$0.00</b>	12C. Adj. Basic Pay <b>\$183100.00</b>		12D. Other Pay <b>\$0.00</b>						
14. Name and Location of Position's Organization					15. TO: Position Title and Number <b>DEPUTY ASSISTANT SECRETARY</b>						
					<b>EV ES03571</b>						
14. Name and Location of Position's Organization					22. Name and Location of Position's Organization <b>EDEV OFC OF CAREER, TECHNICAL, &amp; ADUL</b>						
					<b>WASHINGTON,DC</b>						
<b>EMPLOYEE DATA</b>											
23. Veterans Preference <b>1</b> 1 - None 2 - 5-Point 3 - 10-Point/Disability 4 - 10-Point/Compensable 5 - 10-Point/Other 6 - 10-Point/Compensable/30%				24. Tenure <b>0</b> 0 - None 1 - Permanent 2 - Conditional 3 - Indefinite			25. Agency Use		26. Veterans Preference for RIF <b>X</b> YES <input checked="" type="checkbox"/> NO		
27. FEGLI <b>C0 BASIC ONLY</b>				28. Annuitant Indicator <b>9 NOT APPLICABLE</b>			29. Pay Rate Determinant <b>0</b>				
30. Retirement Plan <b>KF FERS-FRAE &amp; FICA</b>			31. Service Comp. Date (Leave) <b>04/05/2021</b>		32. Work Schedule <b>F FULL-TIME</b>		33. Part-Time Hours Per Biweekly Pay Period				
<b>POSITION DATA</b>											
34. Position Occupied <b>3</b> 1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserved			35. FLSA Category <b>E</b> E - Exempt N - Nonexempt		36. Appropriation Code			37. Bargaining Unit Status <b>8888</b>			
38. Duty Station Code <b>11-0010-001</b>			39. Duty Station (City - County - State or Overseas Location) <b>WASHINGTON, DISTRICT OF COLUMBIA</b>								
40. Agency Data <b>FUNC CLS 00</b>		41. <b>VET STAT X</b>		42. <b>EDUC LVL 21</b>		43. <b>SUPV STAT 2</b>		44. <b>POSITION SENSITIVITY CRITICAL-SENSITIVE</b>			
45. Remarks TENURE AS USED FOR 5 U.S.C. 3502 IS NOT APPLICABLE TO THE SENIOR EXECUTIVE SERVICE. CREDITABLE MILITARY SERVICE: NONE PREVIOUS RETIREMENT COVERAGE: NEVER COVERED APPOINTMENT AFFIDAVIT EXECUTED 04/05/21. EMPLOYEE SUBJECT TO POST-EMPLOYMENT RESTRICTIONS UNDER 18 U.S.C. 207(C) EMPLOYEE IS AUTOMATICALLY COVERED UNDER FERS, FERS-RAE OR FERS-FRAE. WITHIN 60 DAYS OF HIRE YOU ARE ELIGIBLE TO ENROLL IN A FEDERAL HEALTH BENEFITS PLAN AND APPLY FOR THE FEDERAL EMPLOYEE LONG TERM CARE INSURANCE PROGRAM USING AN ABBREVIATED UNDERWRITING APPLICATION. YOU HAVE BEEN ENROLLED IN BASIC LIFE INSURANCE COVERAGE. WITHIN 60 DAYS OF HIRE YOU ARE ELIGIBLE TO ELECT OPTIONAL LIFE INSURANCE. YOU MAY WAIVE YOUR COVERAGE AT ANY TIME. UNLESS YOU MAKE YOUR OWN TSP CONTRIBUTION ELECTION, YOU ARE AUTOMATICALLY ENROLLED IN THE TSP AT A CONTRIBUTION RATE OF 5% OF YOUR BASIC PAY EACH PAY PERIOD.											
46. Employing Department or Agency <b>ED - OCTAE</b>					50. Signature/Authentication and Title of Approving Official <b>210494666 / ELECTRONICALLY SIGNED BY:</b>						
47. Agency Code <b>EDEV</b>		48. Personnel Office ID <b>1306</b>		49. Approval Date <b>04/07/2021</b>		ANTONIA HARRIS CHIEF HUMAN CAPITAL OFFICER					