

**NOTIFICATION OF PERSONNEL ACTION**

|   |                             |   |   |   |  |  |                              |   |   |   |  |  |
|---|-----------------------------|---|---|---|--|--|------------------------------|---|---|---|--|--|
| <b>1. Name (Last, First, Middle)</b><br>VASISHT, KAVEETA P  |                             |   |   | <b>2. Social Security Number</b><br>(b) (2), (b) (6)  |  | <b>3. Date of Birth</b><br>(b) (2), (b) (6)  |                              | <b>4. Effective Date</b><br>12/03/2023                |   |   |  |  |
| <b>FIRST ACTION</b>   |                             |   |   |   | <b>SECOND ACTION</b>   |  |                              |   |   |   |  |  |
| <b>5-A. Code</b><br>721   |                             | <b>5-B. Nature of Action</b><br>REASSIGNMENT                              |   |   | <b>6-A. Code</b>   |  | <b>6-B. Nature of Action</b> |   |   |   |  |  |
| <b>5-C. Code</b><br>ZLM   |                             | <b>5-D. Legal Authority</b><br>P.L.114-255 SEC714 (D)(1) DATED 12-13-2016 |   |   | <b>6-C. Code</b>   |  | <b>6-D. Legal Authority</b>  |   |   |   |  |  |
| <b>5-E. Code</b>  |                             | <b>5-F. Legal Authority</b>   |   |   | <b>6-E. Code</b>   |  | <b>6-F. Legal Authority</b>  |   |   |   |  |  |
| <b>7. FROM: Position Title and Number</b><br>SUPERVISORY PHYSICIAN<br>PD:210C3F<br>POSITION:00452012  |                             |   |   |   | <b>15. TO: Position Title and Number</b><br>ASSOCIATE COMMISSIONER FOR WOMENS HEALTH<br>PD:CS3F64<br>POSITION:00519320                   |  |                              |   |   |   |  |  |
| <b>8. Pay Plan</b><br>AD  | <b>9. Occ. Code</b><br>0602 | <b>10. Grade or Level</b><br>F3   | <b>11. Step or Rate</b><br>00                             | <b>12. Total Salary</b><br>\$307,098.00   | <b>13. Pay Basis</b><br>PA   | <b>16. Pay Plan</b><br>AD  | <b>17. Occ. Code</b><br>0602 | <b>18. Grade or Level</b><br>F3                       | <b>19. Step or Rate</b><br>00                     | <b>20. Total Salary/Award</b><br>\$307,098.00 | <b>21. Pay Basis</b><br>PA                                 |  |
| <b>12A. Basic Pay</b><br>\$307,098.00   |                             | <b>12B. Locality Adj.</b><br>\$0  |   | <b>12C. Adj. Basic Pay</b><br>\$307,098.00  |  | <b>12D. Other Pay</b><br>\$0   |                              | <b>20A. Basic Pay</b><br>\$307,098.00                 |   | <b>20B. Locality Adj.</b><br>\$0              |  |  |
|   |                             |   |   |   |  |  |                              | <b>20C. Adj. Basic Pay</b><br>\$307,098.00            |   | <b>20D. Other Pay</b><br>\$0                  |  |  |
| <b>14. Name and Location of Position's Organization</b><br>FOOD AND DRUG ADMINISTRATION<br>OFC OF WOMEN'S HEALTH<br>SILVER SPRING MD USA                                    |                             |   |   |   | <b>22. Name and Location of Position's Organization</b><br>FOOD AND DRUG ADMINISTRATION<br>OFC OF WOMEN'S HEALTH<br>SILVER SPRING MD USA |  |                              |   |   |   |  |  |
| <b>EMPLOYEE DATA</b>  |                             |   |   |   |  |  |                              |   |   |   |  |  |
| <b>23. Veterans Preference</b><br>(b) (2), (b) (6) 1 - None 3 - 10-Point/Disability 5 - 10-Point/Other<br>2 - 5-Point 4 - 10-Point/Compensable 6 - 10-Point/Compensable/30% |                             |   |   |   |  | <b>24. Tenure</b><br>1 0 - None 2 - Conditional<br>1 - Permanent 3 - Indefinite  |                              |   | <b>25. Agency Use</b>                             |   | <b>26. Veterans Preference for RIF</b><br>(b) (2), (b) (6) |  |
| <b>27. FEGLI</b><br>(b) (2), (b) (6)  |                             |   |   |   |  | <b>28. Annuitant Indicator</b><br>(b) (2), (b) (6)   |                              |   | <b>29. Pay Rate Determinant</b><br>0 REGULAR RATE |   |  |  |
| <b>30. Retirement Plan</b><br>(b) (2), (b) (6)  |                             |   |   | <b>31. Service Comp. Date (Leave)</b><br>(b) (2), (b) (6)   |  | <b>32. Work Schedule</b><br>F FULL TIME  |                              | <b>33. Part-Time Hours Per Pay Period</b><br>Biweekly |   |   |  |  |
| <b>POSITION DATA</b>  |                             |   |   |   |  |  |                              |   |   |   |  |  |
| <b>34. Position Occupied</b><br>1 1 - Competitive Service 3 - SES General<br>2 - Excepted Service 4 - SES Career Reserved   |                             |   | <b>35. FLSA Category</b><br>E E - Exempt<br>N - Nonexempt |   |  | <b>36. Appropriation Code</b><br>469999HW  |                              |   | <b>37. Bargaining Unit Status</b><br>8888         |   |  |  |
| <b>38. Duty Station Code</b><br>241450031   |                             |   |   | <b>39. Duty Station (City - County - State or Overseas Location)</b><br>SILVER SPRING MONTGOMERY MD USA |  |  |                              |   |   |   |  |  |
| <b>40. Agency Data</b>  |                             | <b>41.</b>  |   | <b>42.</b>  |  | <b>43.</b>   |                              | <b>44. PAR NUMBER:</b>                                |   |   |  |  |
| <b>45. Remarks</b><br>POSITION IS AT THE FULL PERFORMANCE LEVEL OR BAND.<br>SPECIAL RATE UNDER 5 U.S.C. 5305.   |                             |   |   |   |  |  |                              |   |   |   |  |  |
| <b>46. Employing Department or Agency</b><br>DEPARTMENT OF HEALTH AND HUMAN SERVICES  |                             |   |   |   |  | <b>50. Signature/Authentication and Title of Approving Official</b><br>ELECTRONICALLY SIGNED BY: MELANIE M. KELLER<br>DIRECTOR, OFF OF TALENT SOLUTI |                              |   |   |   |  |  |
| <b>47. Agency Code</b><br>HE36  |                             | <b>48. Personnel Office ID</b><br>1189                                    |   | <b>49. Approval Date</b><br>12/04/2023  |  |  |                              |   |   |   |  |  |

### NOTIFICATION OF PERSONNEL ACTION

|  |  |  |   |  |   |   |   |  |  |  |                               |   |               |
|--|--|--|---|--|---|---|---|--|--|--|-------------------------------|---|---------------|
| 1. Name (Last, First, Middle)<br><b>VASISHT, KAVEETA P</b>   |  |  |   | 2. Social Security Number<br><b>(b) (2), (b) (6)</b> |   | 3. Date of Birth<br><b>(b) (2), (b) (6)</b> |   | 4. Effective Date<br><b>04/17/2023</b>                   |  |  |                               |   |               |
| <b>FIRST ACTION</b>  |  |  |   |  | <b>SECOND ACTION</b>  |   |   |  |  |  |                               |   |               |
| 5-A. Code<br><b>840</b>  |  | 5-B. Nature of Action<br><b>INDIVIDUAL CASH AWARD RB RATINGS-BASED</b> |   |  | 6-A. Code   |   | 6-B. Nature of Action                             |  |  |  |                               |   |               |
| 5-C. Code  |  | 5-D. Legal Authority   |   |  | 6-C. Code   |   | 6-D. Legal Authority                              |  |  |  |                               |   |               |
| 5-E. Code  |  | 5-F. Legal Authority   |   |  | 6-E. Code   |   | 6-F. Legal Authority                              |  |  |  |                               |   |               |
| 7. FROM: Position Title and Number<br><b>SUPERVISORY PHYSICIAN<br/>PD:210C3F<br/>POSITION:00452012</b>                                     |  |  |   |  | 15. TO: Position Title and Number<br><b>SUPERVISORY PHYSICIAN<br/>PD:210C3F<br/>POSITION:00452012</b>   |   |   |  |  |  |                               |   |               |
| 8. Pay Plan<br><b>AD</b>   |  | 9. Occ. Code<br><b>0602</b>  | 10. Grade or Level<br><b>F3</b>   | 11. Step or Rate<br><b>00</b>                        | 12. Total Salary<br><b>\$307,098.00</b>   | 13. Pay Basis<br><b>PA</b>                  | 16. Pay Plan<br><b>AD</b>                         |  | 17. Occ. Code<br><b>0602</b>                               | 18. Grade or Level<br><b>F3</b>            | 19. Step or Rate<br><b>00</b> | 20. Total Salary/Award<br><b>\$8,929.00</b> | 21. Pay Basis |
| 12A. Basic Pay<br><b>\$307,098.00</b>  |  | 12B. Locality Adj.<br><b>\$0</b>                                       | 12C. Adj. Basic Pay<br><b>\$307,098.00</b>  |  | 12D. Other Pay<br><b>\$0</b>  |   | 20A. Basic Pay<br><b>\$307,098.00</b>             |  | 20B. Locality Adj.<br><b>\$0</b>                           | 20C. Adj. Basic Pay<br><b>\$307,098.00</b> |                               | 20D. Other Pay<br><b>\$0</b>                |               |
| 14. Name and Location of Position's Organization<br><b>FOOD AND DRUG ADMINISTRATION<br/>OFC OF WOMEN'S HEALTH<br/>SILVER SPRING MD USA</b> |  |  |   |  | 22. Name and Location of Position's Organization<br><b>FOOD AND DRUG ADMINISTRATION<br/>OFC OF WOMEN'S HEALTH<br/>SILVER SPRING MD USA</b>            |   |   |  |  |  |                               |   |               |
| <b>EMPLOYEE DATA</b>   |  |  |   |  |   |   |   |  |  |  |                               |   |               |
| 23. Veterans Preference<br><b>(b) (2), (b) (6)</b><br>1 - None      3 - 10-Point/Disability<br>2 - 5-Point    4 - 10-Point/Compensable     |  |  |   |  | 24. Tenure<br><b>1</b><br>0 - None      2 - Conditional<br>1 - Permanent    3 - Indefinite  |   |   | 25. Agency Use   | 26. Veterans Preference for RIF<br><b>(b) (2), (b) (6)</b> |  |                               |   |               |
| 27. FEGLI<br><b>(b) (2), (b) (6)</b>   |  |  |   |  | 28. Annuitant Indicator<br><b>(b) (2), (b) (6)</b>  |   |   | 29. Pay Rate Determinant<br><b>0</b> <b>REGULAR RATE</b> |  |  |                               |   |               |
| 30. Retirement Plan<br><b>(b) (2), (b) (6)</b>   |  |  | 31. Service Comp. Date (Leave)<br><b>(b) (2), (b) (6)</b>   |  | 32. Work Schedule<br><b>F</b> <b>FULL TIME</b>  |   | 33. Part-Time Hours Per<br>Biweekly<br>Pay Period |  |  |  |                               |   |               |
| <b>POSITION DATA</b>   |  |  |   |  |   |   |   |  |  |  |                               |   |               |
| 34. Position Occupied<br><b>1</b><br>1 - Competitive Service    3 - SES General<br>2 - Excepted Service      4 - SES Career Reserved       |  |  | 35. FLSA Category<br><b>E</b><br>E - Exempt<br>N - Nonexempt  |  | 36. Appropriation Code<br><b>369999HW</b>   |   |   | 37. Bargaining Unit Status<br><b>8888</b>                |  |  |                               |   |               |
| 38. Duty Station Code<br><b>241450031</b>  |  |  | 39. Duty Station (City - County - State or Overseas Location)<br><b>SILVER SPRING MONTGOMERY MD USA</b> |  |   |   |   |  |  |  |                               |   |               |
| 40. Agency Data  |  | 41.  | 42.   | 43.  | 44.<br><b>PAR NUMBER:</b>   |   |   |  |  |  |                               |   |               |
| 45. Remarks  |  |  |   |  |   |   |   |  |  |  |                               |   |               |
| 46. Employing Department or Agency<br><b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>   |  |  |   |  | 50. Signature/Authentication and Title of Approving Official<br><b>ELECTRONICALLY SIGNED BY: MELANIE M. KELLER<br/>DIRECTOR, OFF OF TALENT SOLUTI</b> |   |   |  |  |  |                               |   |               |
| 47. Agency Code<br><b>HE36</b>   |  | 48. Personnel Office ID<br><b>1189</b>                                 |   | 49. Approval Date<br><b>04/20/2023</b>               |   |   |   |  |  |  |                               |   |               |

NOTIFICATION OF PERSONNEL ACTION

|   |   |                                      |                                 |
|---|---|--------------------------------------|---------------------------------|
| 1. Name (Last, First, Middle)<br>VASISHT, KAVEETA P | 2. Social Security Number<br>(b) (2), (b) (6) | 3. Date of Birth<br>(b) (2), (b) (6) | 4. Effective Date<br>02/26/2023 |
|---|---|--------------------------------------|---------------------------------|

| FIRST ACTION     |  | SECOND ACTION |                       |
|------------------|--|---------------|-----------------------|
| 5-A. Code<br>893 | 5-B. Nature of Action<br>WITHIN-RANGE INCREASE PROVIDED ON REGULAR | 6-A. Code     | 6-B. Nature of Action |
| 5-C. Code<br>ZLM | 5-D. Legal Authority<br>P.L.114-255 SEC714 (D) DATED 12-13-2016    | 6-C. Code     | 6-D. Legal Authority  |
| 5-E. Code        | 5-F. Legal Authority   | 6-E. Code     | 6-F. Legal Authority  |

|   |  |
|---|--|
| 7. FROM: Position Title and Number<br>SUPERVISORY PHYSICIAN<br>PD:210C3F<br>POSITION:00452012 | 15. TO: Position Title and Number<br>SUPERVISORY PHYSICIAN<br>PD:210C3F<br>POSITION:00452012 |
|---|--|

|                                |                           |                                     |                        |                                  |                           |                                     |                       |                          |                        |  |                     |
|--------------------------------|---------------------------|-------------------------------------|------------------------|----------------------------------|---------------------------|-------------------------------------|-----------------------|--------------------------|------------------------|--|---------------------|
| 8. Pay Plan<br>AD              | 9. Occ. Code<br>0602      | 10. Grade or Level<br>F3            | 11. Step or Rate<br>00 | 12. Total Salary<br>\$298,153.00 | 13. Pay Basis<br>PA       | 16. Pay Plan<br>AD                  | 17. Occ. Code<br>0602 | 18. Grade or Level<br>F3 | 19. Step or Rate<br>00 | 20. Total Salary/Award<br>\$307,098.00 | 21. Pay Basis<br>PA |
| 12A. Basic Pay<br>\$298,153.00 | 12B. Locality Adj.<br>\$0 | 12C. Adj. Basic Pay<br>\$298,153.00 | 12D. Other Pay<br>\$0  | 20A. Basic Pay<br>\$307,098.00   | 20B. Locality Adj.<br>\$0 | 20C. Adj. Basic Pay<br>\$307,098.00 | 20D. Other Pay<br>\$0 |                          |                        |  |                     |

|   |   |
|---|---|
| 14. Name and Location of Position's Organization<br>FOOD AND DRUG ADMINISTRATION<br>OFC OF WOMEN'S HEALTH<br>SILVER SPRING MD USA | 22. Name and Location of Position's Organization<br>FOOD AND DRUG ADMINISTRATION<br>OFC OF WOMEN'S HEALTH<br>SILVER SPRING MD USA |
|---|---|

|   |  |  |  |  |   |
|---|--|--|--|--|---|
| 23. Veterans Preference<br>1 - None 3 - 10-Point/Disability<br>2 - 5-Point 4 - 10-Point/Compensable |  | 24. Tenure<br>1 0 - None 2 - Conditional<br>1 - Permanent 3 - Indefinite |  | 25. Agency Use                             | 26. Veterans Preference for RIF<br>(b) (2), (b) (6) |
| 27. FEGLI<br>(b) (2), (b) (6)   |  | 28. Annuitant Indicator<br>(b) (2), (b) (6)                              |  | 29. Pay Rate Determinant<br>0 REGULAR RATE |   |
| 30. Retirement Plan<br>(b) (2), (b) (6)   |  | 31. Service Comp. Date (Leave)<br>(b) (2), (b) (6)                       |  | 32. Work Schedule<br>F FULL TIME           |   |
| 33. Part-Time Hours Per<br>Biweekly<br>Pay Period   |  |  |  |  |   |

|  |  |  |                                    |                                    |
|--|--|--|------------------------------------|------------------------------------|
| 34. Position Occupied<br>1 1 - Competitive Service 3 - SES General<br>2 - Excepted Service 4 - SES Career Reserved |  | 35. FLSA Category<br>E E - Exempt<br>N - Nonexempt   | 36. Appropriation Code<br>369999HW | 37. Bargaining Unit Status<br>8888 |
| 38. Duty Station Code<br>241450031   |  | 39. Duty Station (City - County - State or Overseas Location)<br>SILVER SPRING MONTGOMERY MD USA |                                    |                                    |

|                 |     |     |     |                    |
|-----------------|-----|-----|-----|--------------------|
| 40. Agency Data | 41. | 42. | 43. | 44.<br>PAR NUMBER: |
|-----------------|-----|-----|-----|--------------------|

|   |                                 |   |  |
|---|---------------------------------|---|--|
| 45. Remarks<br>WORK PERFORMANCE IS AT AN ACCEPTABLE LEVEL OF COMPETENCE.<br>CURES 3% ZONE INCREASE. |                                 |   |  |
| 46. Employing Department or Agency<br>DEPARTMENT OF HEALTH AND HUMAN SERVICES                       |                                 | 50. Signature/Authentication and Title of Approving Official<br>ELECTRONICALLY SIGNED BY: MELANIE M. KELLER<br>DIRECTOR, OFF OF TALENT SOLUTI |  |
| 47. Agency Code<br>HE36   | 48. Personnel Office ID<br>1189 | 49. Approval Date<br>02/24/2023   |  |

## NOTIFICATION OF PERSONNEL ACTION

|  |                             |  |  |   |   |   |   |   |   |   |  |  |  |
|--|-----------------------------|--|--|---|---|---|---|---|---|---|--|--|--|
| 1. Name (Last, First, Middle)<br><b>VASISHT, KAVEETA P</b>   |                             |  |  | 2. Social Security Number<br><b>(b) (2), (b) (6)</b>  |   | 3. Date of Birth<br><b>(b) (2), (b) (6)</b>   |   | 4. Effective Date<br><b>01/01/2023</b>      |   |   |  |  |  |
| <b>FIRST ACTION</b>  |                             |  |  |   | <b>SECOND ACTION</b>  |   |   |   |   |   |  |  |  |
| 5-A. Code<br><b>002</b>  |                             | 5-B. Nature of Action<br><b>CORRECTION</b> |  |   | 6-A. Code<br><b>894</b>   |   | 6-B. Nature of Action<br><b>GEN ADJ</b>                             |   |   |   |  |  |  |
| 5-C. Code  |                             | 5-D. Legal Authority                       |  |   | 6-C. Code<br><b>QWM</b>   |   | 6-D. Legal Authority<br><b>REG 531.207</b>                          |   |   |   |  |  |  |
| 5-E. Code  |                             | 5-F. Legal Authority                       |  |   | 6-E. Code<br><b>ZLM</b>   |   | 6-F. Legal Authority<br><b>P.L.114-255 SEC 714(D)(1) 12/13/2016</b> |   |   |   |  |  |  |
| 7. FROM: Position Title and Number<br><b>SUPERVISORY PHYSICIAN<br/>PD:210C3F<br/>POSITION:00452012</b>                                     |                             |  |  |   | 15. TO: Position Title and Number<br><b>SUPERVISORY PHYSICIAN<br/>PD:210C3F<br/>POSITION:00452012</b> |   |   |   |   |   |  |  |  |
| 8. Pay Plan<br><b>AD</b>   | 9. Occ. Code<br><b>0602</b> | 10. Grade or Level<br><b>F3</b>            | 11. Step or Rate<br><b>00</b>              | 12. Total Salary<br><b>\$289,413.00</b>   | 13. Pay Basis<br><b>PA</b>  | 16. Pay Plan<br><b>AD</b>   | 17. Occ. Code<br><b>0602</b>  | 18. Grade or Level<br><b>F3</b>             | 19. Step or Rate<br><b>00</b>                     | 20. Total Salary/Award<br><b>\$298,153.00</b> | 21. Pay Basis<br><b>PA</b>                                 |  |  |
| 12A. Basic Pay<br><b>\$289,413.00</b>  |                             | 12B. Locality Adj.<br><b>\$0</b>           | 12C. Adj. Basic Pay<br><b>\$289,413.00</b> |   | 12D. Other Pay<br><b>\$0</b>  | 20A. Basic Pay<br><b>\$298,153.00</b>   |   | 20B. Locality Adj.<br><b>\$0</b>            | 20C. Adj. Basic Pay<br><b>\$298,153.00</b>        |   | 20D. Other Pay<br><b>\$0</b>                               |  |  |
| 14. Name and Location of Position's Organization<br><b>FOOD AND DRUG ADMINISTRATION<br/>OFC OF WOMEN'S HEALTH<br/>SILVER SPRING MD USA</b> |                             |  |  |   |   | 22. Name and Location of Position's Organization<br><b>FOOD AND DRUG ADMINISTRATION<br/>OFC OF WOMEN'S HEALTH<br/>SILVER SPRING MD USA</b>            |   |   |   |   |  |  |  |
| <b>EMPLOYEE DATA</b>   |                             |  |  |   |   |   |   |   |   |   |  |  |  |
| 23. Veterans Preference<br><b>(b) (2), (b) (6)</b>   |                             |  |  |   |   | 24. Tenure<br><b>1</b>  |   |   | 25. Agency Use                                    |   | 26. Veterans Preference for RIF<br><b>(b) (2), (b) (6)</b> |  |  |
| 27. FEGLI<br><b>(b) (2), (b) (6)</b>   |                             |  |  |   |   | 28. Annuitant Indicator<br><b>(b) (2), (b) (6)</b>  |   |   | 29. Pay Rate Determinant<br><b>0</b> REGULAR RATE |   |  |  |  |
| 30. Retirement Plan<br><b>(b) (2), (b) (6)</b>   |                             |  |  | 31. Service Comp. Date (Leave)<br><b>(b) (2), (b) (6)</b>   |   | 32. Work Schedule<br><b>F</b> FULL TIME   |   | 33. Part-Time Hours Per Biweekly Pay Period |   |   |  |  |  |
| <b>POSITION DATA</b>   |                             |  |  |   |   |   |   |   |   |   |  |  |  |
| 34. Position Occupied<br><b>1</b>  |                             |  |  | 35. FLSA Category<br><b>E</b>   |   | 36. Appropriation Code<br><b>369999HW</b>   |   |   | 37. Bargaining Unit Status<br><b>8888</b>         |   |  |  |  |
| 38. Duty Station Code<br><b>241450031</b>  |                             |  |  | 39. Duty Station (City - County - State or Overseas Location)<br><b>SILVER SPRING MONTGOMERY MD USA</b> |   |   |   |   |   |   |  |  |  |
| 40. Agency Data  |                             | 41.  |  | 42.   |   | 43.   |   | 44. PAR NUMBER:                             |   |   |  |  |  |
| 45. Remarks<br><b>CORRECTS ITEM 20, 20A AND 20C FROM \$289,413.</b>  |                             |  |  |   |   |   |   |   |   |   |  |  |  |
| 46. Employing Department or Agency<br><b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>   |                             |  |  |   |   | 50. Signature/Authentication and Title of Approving Official<br><b>ELECTRONICALLY SIGNED BY: MELANIE M. KELLER<br/>DIRECTOR, OFF OF TALENT SOLUTI</b> |   |   |   |   |  |  |  |
| 47. Agency Code<br><b>HE36</b>   |                             | 48. Personnel Office ID<br><b>1189</b>     |  | 49. Approval Date<br><b>02/09/2023</b>  |   |   |   |   |   |   |  |  |  |

## NOTIFICATION OF PERSONNEL ACTION

|  |                             |   |   |   |   |   |                              |   |  |   |  |  |
|--|-----------------------------|---|---|---|---|---|------------------------------|---|--|---|--|--|
| 1. Name (Last, First, Middle)<br><b>VASISHT, KAVEETA P</b>   |                             |   |   | 2. Social Security Number<br><b>(b) (2), (b) (6)</b>  |   | 3. Date of Birth<br><b>(b) (2), (b) (6)</b>   |                              | 4. Effective Date<br><b>01/01/2023</b>            |  |   |  |  |
| <b>FIRST ACTION</b>  |                             |   |   |   | <b>SECOND ACTION</b>  |   |                              |   |  |   |  |  |
| 5-A. Code<br><b>894</b>  |                             | 5-B. Nature of Action<br><b>GEN ADJ</b>                             |   |   | 6-A. Code   |   | 6-B. Nature of Action        |   |  |   |  |  |
| 5-C. Code<br><b>QWM</b>  |                             | 5-D. Legal Authority<br><b>REG 531.207</b>                          |   |   | 6-C. Code   |   | 6-D. Legal Authority         |   |  |   |  |  |
| 5-E. Code<br><b>ZLM</b>  |                             | 5-F. Legal Authority<br><b>P.L.114-255 SEC 714(D)(1) 12/13/2016</b> |   |   | 6-E. Code   |   | 6-F. Legal Authority         |   |  |   |  |  |
| 7. FROM: Position Title and Number<br><b>SUPERVISORY PHYSICIAN<br/>PD:210C3F<br/>POSITION:00452012</b>                                     |                             |   |   |   | 15. TO: Position Title and Number<br><b>SUPERVISORY PHYSICIAN<br/>PD:210C3F<br/>POSITION:00452012</b> |   |                              |   |  |   |  |  |
| 8. Pay Plan<br><b>AD</b>   | 9. Occ. Code<br><b>0602</b> | 10. Grade or Level<br><b>00</b>                                     | 11. Step or Rate<br><b>00</b>                             | 12. Total Salary<br><b>\$275,999.00</b>   | 13. Pay Basis<br><b>PA</b>  | 16. Pay Plan<br><b>AD</b>   | 17. Occ. Code<br><b>0602</b> | 18. Grade or Level<br><b>F3</b>                   | 19. Step or Rate<br><b>00</b>                            | 20. Total Salary/Award<br><b>\$289,413.00</b> | 21. Pay Basis<br><b>PA</b>                                 |  |
| 12A. Basic Pay<br><b>\$275,999.00</b>  |                             | 12B. Locality Adj.<br><b>\$0</b>                                    | 12C. Adj. Basic Pay<br><b>\$275,999.00</b>                |   | 12D. Other Pay<br><b>\$0</b>  | 20A. Basic Pay<br><b>\$289,413.00</b>   |                              | 20B. Locality Adj.<br><b>\$0</b>                  | 20C. Adj. Basic Pay<br><b>\$289,413.00</b>               |   | 20D. Other Pay<br><b>\$0</b>                               |  |
| 14. Name and Location of Position's Organization<br><b>FOOD AND DRUG ADMINISTRATION<br/>OFC OF WOMEN'S HEALTH<br/>SILVER SPRING MD USA</b> |                             |   |   |   |   | 22. Name and Location of Position's Organization<br><b>FOOD AND DRUG ADMINISTRATION<br/>OFC OF WOMEN'S HEALTH<br/>SILVER SPRING MD USA</b>            |                              |   |  |   |  |  |
| <b>EMPLOYEE DATA</b>   |                             |   |   |   |   |   |                              |   |  |   |  |  |
| 23. Veterans Preference<br><b>(b) (2), (b) (6)</b><br>1 - None      3 - 10-Point/Disability<br>2 - 5-Point    4 - 10-Point/Compensable     |                             |   |   |   |   | 24. Tenure<br><b>1</b><br>0 - None      2 - Conditional<br>1 - Permanent    3 - Indefinite  |                              |   | 25. Agency Use   |   | 26. Veterans Preference for RIF<br><b>(b) (2), (b) (6)</b> |  |
| 27. FEGLI<br><b>(b) (2), (b) (6)</b>   |                             |   |   |   |   | 28. Annuitant Indicator<br><b>(b) (2), (b) (6)</b>  |                              |   | 29. Pay Rate Determinant<br><b>0</b> <b>REGULAR RATE</b> |   |  |  |
| 30. Retirement Plan<br><b>(b) (2), (b) (6)</b>   |                             |   | 31. Service Comp. Date (Leave)<br><b>(b) (2), (b) (6)</b> |   | 32. Work Schedule<br><b>F</b> <b>FULL TIME</b>  |   |                              | 33. Part-Time Hours Per<br>Biweekly<br>Pay Period |  |   |  |  |
| <b>POSITION DATA</b>   |                             |   |   |   |   |   |                              |   |  |   |  |  |
| 34. Position Occupied<br><b>1</b><br>1 - Competitive Service    3 - SES General<br>2 - Excepted Service      4 - SES Career Reserved       |                             |   |   | 35. FLSA Category<br><b>E</b><br>E - Exempt<br>N - Nonexempt  |   | 36. Appropriation Code<br><b>369999HW</b>   |                              |   | 37. Bargaining Unit Status<br><b>8888</b>                |   |  |  |
| 38. Duty Station Code<br><b>241450031</b>  |                             |   |   | 39. Duty Station (City - County - State or Overseas Location)<br><b>SILVER SPRING MONTGOMERY MD USA</b> |   |   |                              |   |  |   |  |  |
| 40. Agency Data  |                             | 41.   |   | 42.   |   | 43.   |                              | 44. PAR NUMBER:                                   |  |   |  |  |
| 45. Remarks  |                             |   |   |   |   |   |                              |   |  |   |  |  |
| 46. Employing Department or Agency<br><b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>   |                             |   |   |   |   | 50. Signature/Authentication and Title of Approving Official<br><b>ELECTRONICALLY SIGNED BY: MELANIE M. KELLER<br/>DIRECTOR, OFF OF TALENT SOLUTI</b> |                              |   |  |   |  |  |
| 47. Agency Code<br><b>HE36</b>   |                             | 48. Personnel Office ID<br><b>1189</b>                              |   | 49. Approval Date<br><b>01/11/2023</b>  |   |   |                              |   |  |   |  |  |

## NOTIFICATION OF PERSONNEL ACTION

|  |  |  |   |  |   |   |                                       |   |                                  |  |                                 |                               |   |               |
|--|--|--|---|--|---|---|---------------------------------------|---|----------------------------------|--|---------------------------------|-------------------------------|---|---------------|
| 1. Name (Last, First, Middle)<br><b>VASISHT, KAVEETA P</b>   |  |  |   | 2. Social Security Number<br><b>(b) (2), (b) (6)</b> |   | 3. Date of Birth<br><b>(b) (2), (b) (6)</b> |                                       | 4. Effective Date<br><b>04/20/2022</b>            |                                  |  |                                 |                               |   |               |
| <b>FIRST ACTION</b>  |  |  |   |  | <b>SECOND ACTION</b>  |   |                                       |   |                                  |  |                                 |                               |   |               |
| 5-A. Code<br><b>840</b>  |  | 5-B. Nature of Action<br><b>INDIVIDUAL CASH AWARD RB RATINGS-BASED</b> |   |  | 6-A. Code   |   | 6-B. Nature of Action                 |   |                                  |  |                                 |                               |   |               |
| 5-C. Code  |  | 5-D. Legal Authority   |   |  | 6-C. Code   |   | 6-D. Legal Authority                  |   |                                  |  |                                 |                               |   |               |
| 5-E. Code  |  | 5-F. Legal Authority   |   |  | 6-E. Code   |   | 6-F. Legal Authority                  |   |                                  |  |                                 |                               |   |               |
| 7. FROM: Position Title and Number<br><b>SUPERVISORY PHYSICIAN<br/>PD:210C3F<br/>POSITION:00452012</b>                                     |  |  |   |  | 15. TO: Position Title and Number<br><b>SUPERVISORY PHYSICIAN<br/>PD:210C3F<br/>POSITION:00452012</b>   |   |                                       |   |                                  |  |                                 |                               |   |               |
| 8. Pay Plan<br><b>AD</b>   |  | 9. Occ. Code<br><b>0602</b>  | 10. Grade or Level<br><b>00</b>   | 11. Step or Rate<br><b>00</b>                        | 12. Total Salary<br><b>\$275,999.00</b>   | 13. Pay Basis<br><b>PA</b>                  |                                       | 16. Pay Plan<br><b>AD</b>                         |                                  | 17. Occ. Code<br><b>0602</b>                               | 18. Grade or Level<br><b>00</b> | 19. Step or Rate<br><b>00</b> | 20. Total Salary/Award<br><b>\$5,604.00</b> | 21. Pay Basis |
| 12A. Basic Pay<br><b>\$275,999.00</b>  |  | 12B. Locality Adj.<br><b>\$0</b>                                       | 12C. Adj. Basic Pay<br><b>\$275,999.00</b>  |  | 12D. Other Pay<br><b>\$0</b>  |   | 20A. Basic Pay<br><b>\$275,999.00</b> |   | 20B. Locality Adj.<br><b>\$0</b> | 20C. Adj. Basic Pay<br><b>\$275,999.00</b>                 |                                 | 20D. Other Pay<br><b>\$0</b>  |   |               |
| 14. Name and Location of Position's Organization<br><b>FOOD AND DRUG ADMINISTRATION<br/>OFC OF WOMEN'S HEALTH<br/>SILVER SPRING MD USA</b> |  |  |   |  | 22. Name and Location of Position's Organization<br><b>FOOD AND DRUG ADMINISTRATION<br/>OFC OF WOMEN'S HEALTH<br/>SILVER SPRING MD USA</b>            |   |                                       |   |                                  |  |                                 |                               |   |               |
| <b>EMPLOYEE DATA</b>   |  |  |   |  |   |   |                                       |   |                                  |  |                                 |                               |   |               |
| 23. Veterans Preference<br><b>(b) (2), (b) (6)</b>   |  |  |   |  | 24. Tenure<br><b>1</b>  |   |                                       | 25. Agency Use                                    |                                  | 26. Veterans Preference for RIF<br><b>(b) (2), (b) (6)</b> |                                 |                               |   |               |
| 27. FEGLI<br><b>(b) (2), (b) (6)</b>   |  |  |   |  | 28. Annuitant Indicator<br><b>(b) (2), (b) (6)</b>  |   |                                       | 29. Pay Rate Determinant<br><b>0</b> REGULAR RATE |                                  |  |                                 |                               |   |               |
| 30. Retirement Plan<br><b>(b) (2), (b) (6)</b>   |  |  | 31. Service Comp. Date (Leave)<br><b>(b) (2), (b) (6)</b>   |  | 32. Work Schedule<br><b>F</b> FULL TIME   |   |                                       | 33. Part-Time Hours Per<br>Biweekly<br>Pay Period |                                  |  |                                 |                               |   |               |
| <b>POSITION DATA</b>   |  |  |   |  |   |   |                                       |   |                                  |  |                                 |                               |   |               |
| 34. Position Occupied<br><b>1</b>  |  |  | 35. FLSA Category<br><b>E</b>   |  | 36. Appropriation Code<br><b>269999HW</b>   |   |                                       | 37. Bargaining Unit Status<br><b>8888</b>         |                                  |  |                                 |                               |   |               |
| 38. Duty Station Code<br><b>241450031</b>  |  |  | 39. Duty Station (City - County - State or Overseas Location)<br><b>SILVER SPRING MONTGOMERY MD USA</b> |  |   |   |                                       |   |                                  |  |                                 |                               |   |               |
| 40. Agency Data  |  | 41.  |   | 42.  |   | 43.   |                                       | 44. PAR NUMBER:                                   |                                  |  |                                 |                               |   |               |
| 45. Remarks  |  |  |   |  |   |   |                                       |   |                                  |  |                                 |                               |   |               |
| 46. Employing Department or Agency<br><b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>   |  |  |   |  | 50. Signature/Authentication and Title of Approving Official<br><b>ELECTRONICALLY SIGNED BY: MELANIE M. KELLER<br/>DIRECTOR, OFF OF TALENT SOLUTI</b> |   |                                       |   |                                  |  |                                 |                               |   |               |
| 47. Agency Code<br><b>HE36</b>   |  | 48. Personnel Office ID<br><b>1189</b>                                 |   | 49. Approval Date<br><b>04/20/2022</b>               |   |   |                                       |   |                                  |  |                                 |                               |   |               |

## NOTIFICATION OF PERSONNEL ACTION

|  |                             |  |                               |   |                            |  |                              |  |  |   |  |  |
|--|-----------------------------|--|-------------------------------|---|----------------------------|--|------------------------------|--|--|---|--|--|
| <b>1. Name (Last, First, Middle)</b><br>VASISHT, KAVEETA P   |                             |  |                               | <b>2. Social Security Number</b><br>(b) (2), (b) (6)  |                            | <b>3. Date of Birth</b><br>(b) (2), (b) (6)  |                              | <b>4. Effective Date</b><br>01/02/2022                   |  |   |  |  |
| <b>FIRST ACTION</b>  |                             |  |                               |   |                            | <b>SECOND ACTION</b>   |                              |  |  |   |  |  |
| <b>5-A. Code</b><br>894  |                             | <b>5-B. Nature of Action</b><br>GEN ADJ                                  |                               |   |                            | <b>6-A. Code</b>   |                              | <b>6-B. Nature of Action</b>                             |  |   |  |  |
| <b>5-C. Code</b><br>QWM  |                             | <b>5-D. Legal Authority</b><br>REG 531.207                               |                               |   |                            | <b>6-C. Code</b>   |                              | <b>6-D. Legal Authority</b>                              |  |   |  |  |
| <b>5-E. Code</b><br>ZLM  |                             | <b>5-F. Legal Authority</b><br>P.L.114-255 SEC714(D)(1) DATED 12-13-2016 |                               |   |                            | <b>6-E. Code</b>   |                              | <b>6-F. Legal Authority</b>                              |  |   |  |  |
| <b>7. FROM: Position Title and Number</b><br>SUPERVISORY PHYSICIAN<br>PD:210C3F<br>POSITION:00452012                                     |                             |  |                               |   |                            | <b>15. TO: Position Title and Number</b><br>SUPERVISORY PHYSICIAN<br>PD:210C3F<br>POSITION:00452012  |                              |  |  |   |  |  |
| <b>8. Pay Plan</b><br>AD   | <b>9. Occ. Code</b><br>0602 | <b>10. Grade or Level</b><br>00  | <b>11. Step or Rate</b><br>00 | <b>12. Total Salary</b><br>\$275,999.00   | <b>13. Pay Basis</b><br>PA | <b>16. Pay Plan</b><br>AD  | <b>17. Occ. Code</b><br>0602 | <b>18. Grade or Level</b><br>00                          | <b>19. Step or Rate</b><br>00                          | <b>20. Total Salary/Award</b><br>\$284,334.00 | <b>21. Pay Basis</b><br>PA                                 |  |
| <b>12A. Basic Pay</b><br>\$275,999.00  |                             | <b>12B. Locality Adj.</b><br>\$0   |                               | <b>12C. Adj. Basic Pay</b><br>\$275,999.00  |                            | <b>12D. Other Pay</b><br>\$0   |                              | <b>20A. Basic Pay</b><br>\$284,334.00                    |  | <b>20B. Locality Adj.</b><br>\$0              |  |  |
|  |                             |  |                               |   |                            |  |                              | <b>20C. Adj. Basic Pay</b><br>\$284,334.00               |  | <b>20D. Other Pay</b><br>\$0                  |  |  |
| <b>14. Name and Location of Position's Organization</b><br>FOOD AND DRUG ADMINISTRATION<br>OFC OF WOMEN'S HEALTH<br>SILVER SPRING MD USA |                             |  |                               |   |                            | <b>22. Name and Location of Position's Organization</b><br>FOOD AND DRUG ADMINISTRATION<br>OFC OF WOMEN'S HEALTH<br>SILVER SPRING MD USA             |                              |  |  |   |  |  |
| <b>EMPLOYEE DATA</b>   |                             |  |                               |   |                            |  |                              |  |  |   |  |  |
| <b>23. Veterans Preference</b><br>(b) (2), (b) (6)<br>1 - None      3 - 10-Point/Disability<br>2 - 5-Point    4 - 10-Point/Compensable   |                             |  |                               |   |                            | <b>24. Tenure</b><br>1      0 - None      2 - Conditional<br>1 - Permanent    3 - Indefinite   |                              |  | <b>25. Agency Use</b>                                  |   | <b>26. Veterans Preference for RIF</b><br>(b) (2), (b) (6) |  |
| <b>27. FEGLI</b><br>(b) (2), (b) (6)   |                             |  |                               |   |                            | <b>28. Annuitant Indicator</b><br>(b) (2), (b) (6)   |                              |  | <b>29. Pay Rate Determinant</b><br>0      REGULAR RATE |   |  |  |
| <b>30. Retirement Plan</b><br>(b) (2), (b) (6)   |                             |  |                               | <b>31. Service Comp. Date (Leave)</b><br>(b) (2), (b) (6)   |                            | <b>32. Work Schedule</b><br>F      FULL TIME   |                              | <b>33. Part-Time Hours Per</b><br>Biweekly<br>Pay Period |  |   |  |  |
| <b>POSITION DATA</b>   |                             |  |                               |   |                            |  |                              |  |  |   |  |  |
| <b>34. Position Occupied</b><br>1      1 - Competitive Service      3 - SES General<br>2 - Excepted Service      4 - SES Career Reserved |                             |  |                               | <b>35. FLSA Category</b><br>E      E - Exempt<br>N - Nonexempt  |                            | <b>36. Appropriation Code</b><br>269999HW  |                              |  | <b>37. Bargaining Unit Status</b><br>8888              |   |  |  |
| <b>38. Duty Station Code</b><br>241450031  |                             |  |                               | <b>39. Duty Station (City - County - State or Overseas Location)</b><br>SILVER SPRING MONTGOMERY MD USA |                            |  |                              |  |  |   |  |  |
| <b>40. Agency Data</b>   |                             | <b>41.</b>   |                               | <b>42.</b>  |                            | <b>43.</b>   |                              | <b>44. PAR NUMBER:</b>                                   |  |   |  |  |
| <b>45. Remarks</b>   |                             |  |                               |   |                            |  |                              |  |  |   |  |  |
| <b>46. Employing Department or Agency</b><br>DEPARTMENT OF HEALTH AND HUMAN SERVICES   |                             |  |                               |   |                            | <b>50. Signature/Authentication and Title of Approving Official</b><br>ELECTRONICALLY SIGNED BY: MELANIE M. KELLER<br>DIRECTOR, OFF OF TALENT SOLUTI |                              |  |  |   |  |  |
| <b>47. Agency Code</b><br>HE36   |                             | <b>48. Personnel Office ID</b><br>1189                                   |                               | <b>49. Approval Date</b><br>02/09/2023  |                            |  |                              |  |  |   |  |  |

## NOTIFICATION OF PERSONNEL ACTION

|  |                             |  |                               |   |   |  |                              |  |  |   |  |  |
|--|-----------------------------|--|-------------------------------|---|---|--|------------------------------|--|--|---|--|--|
| <b>1. Name (Last, First, Middle)</b><br>VASISHT, KAVEETA P   |                             |  |                               | <b>2. Social Security Number</b><br>(b) (2), (b) (6)  |   | <b>3. Date of Birth</b><br>(b) (2), (b) (6)  |                              | <b>4. Effective Date</b><br>03/15/2021     |  |   |  |  |
| <b>FIRST ACTION</b>  |                             |  |                               |   | <b>SECOND ACTION</b>  |  |                              |  |  |   |  |  |
| <b>5-A. Code</b><br>840  |                             | <b>5-B. Nature of Action</b><br>INDIVIDUAL CASH AWARD RB RATINGS-BASED |                               |   | <b>6-A. Code</b>  |  | <b>6-B. Nature of Action</b> |  |  |   |  |  |
| <b>5-C. Code</b>   |                             | <b>5-D. Legal Authority</b>  |                               |   | <b>6-C. Code</b>  |  | <b>6-D. Legal Authority</b>  |  |  |   |  |  |
| <b>5-E. Code</b>   |                             | <b>5-F. Legal Authority</b>  |                               |   | <b>6-E. Code</b>  |  | <b>6-F. Legal Authority</b>  |  |  |   |  |  |
| <b>7. FROM: Position Title and Number</b><br>SUPERVISORY PHYSICIAN<br>PD:210C3F<br>POSITION:00452012                                     |                             |  |                               |   | <b>15. TO: Position Title and Number</b><br>SUPERVISORY PHYSICIAN<br>PD:210C3F<br>POSITION:00452012 |  |                              |  |  |   |  |  |
| <b>8. Pay Plan</b><br>AD   | <b>9. Occ. Code</b><br>0602 | <b>10. Grade or Level</b><br>00  | <b>11. Step or Rate</b><br>00 | <b>12. Total Salary</b><br>\$275,999.00   | <b>13. Pay Basis</b><br>PA  | <b>16. Pay Plan</b><br>AD  | <b>17. Occ. Code</b><br>0602 | <b>18. Grade or Level</b><br>00            | <b>19. Step or Rate</b><br>00                            | <b>20. Total Salary/Award</b><br>\$7,252.00 | <b>21. Pay Basis</b>                                       |  |
| <b>12A. Basic Pay</b><br>\$275,999.00  |                             | <b>12B. Locality Adj.</b><br>\$0                                       |                               | <b>12C. Adj. Basic Pay</b><br>\$275,999.00  |   | <b>12D. Other Pay</b><br>\$0   |                              | <b>20A. Basic Pay</b><br>\$275,999.00      |  | <b>20B. Locality Adj.</b><br>\$0            |  |  |
|  |                             |  |                               |   |   |  |                              | <b>20C. Adj. Basic Pay</b><br>\$275,999.00 |  | <b>20D. Other Pay</b><br>\$0                |  |  |
| <b>14. Name and Location of Position's Organization</b><br>FOOD AND DRUG ADMINISTRATION<br>OFC OF WOMEN'S HEALTH<br>SILVER SPRING MD USA |                             |  |                               |   |   | <b>22. Name and Location of Position's Organization</b><br>FOOD AND DRUG ADMINISTRATION<br>OFC OF WOMEN'S HEALTH<br>SILVER SPRING MD USA             |                              |  |  |   |  |  |
| <b>EMPLOYEE DATA</b>   |                             |  |                               |   |   |  |                              |  |  |   |  |  |
| <b>23. Veterans Preference</b><br>(b) (2), (b) (6)<br>1 - None    3 - 10-Point/Disability<br>2 - 5-Point    4 - 10-Point/Compensable     |                             |  |                               |   |   | <b>24. Tenure</b><br>1    0 - None    2 - Conditional<br>1 - Permanent    3 - Indefinite   |                              |  | <b>25. Agency Use</b>                                    |   | <b>26. Veterans Preference for RIF</b><br>(b) (2), (b) (6) |  |
| <b>27. FEGLI</b><br>(b) (2), (b) (6)   |                             |  |                               |   |   | <b>28. Annuitant Indicator</b><br>(b) (2), (b) (6)   |                              |  | <b>29. Pay Rate Determinant</b><br>0    REGULAR RATE     |   |  |  |
| <b>30. Retirement Plan</b><br>(b) (2), (b) (6)   |                             |  |                               | <b>31. Service Comp. Date (Leave)</b><br>(b) (2), (b) (6)   |   | <b>32. Work Schedule</b><br>F    FULL TIME   |                              |  | <b>33. Part-Time Hours Per</b><br>Biweekly<br>Pay Period |   |  |  |
| <b>POSITION DATA</b>   |                             |  |                               |   |   |  |                              |  |  |   |  |  |
| <b>34. Position Occupied</b><br>1    1 - Competitive Service    3 - SES General<br>2 - Excepted Service    4 - SES Career Reserved       |                             |  |                               | <b>35. FLSA Category</b><br>E    E - Exempt<br>N - Nonexempt  |   | <b>36. Appropriation Code</b><br>169999HW  |                              |  | <b>37. Bargaining Unit Status</b><br>8888                |   |  |  |
| <b>38. Duty Station Code</b><br>241450031  |                             |  |                               | <b>39. Duty Station (City - County - State or Overseas Location)</b><br>SILVER SPRING MONTGOMERY MD USA |   |  |                              |  |  |   |  |  |
| <b>40. Agency Data</b>   |                             | <b>41.</b>   |                               | <b>42.</b>  |   | <b>43.</b>   |                              | <b>44. PAR NUMBER:</b>                     |  |   |  |  |
| <b>45. Remarks</b>   |                             |  |                               |   |   |  |                              |  |  |   |  |  |
| <b>46. Employing Department or Agency</b><br>DEPARTMENT OF HEALTH AND HUMAN SERVICES   |                             |  |                               |   |   | <b>50. Signature/Authentication and Title of Approving Official</b><br>ELECTRONICALLY SIGNED BY: MELANIE M. KELLER<br>DIRECTOR, OFF OF TALENT SOLUTI |                              |  |  |   |  |  |
| <b>47. Agency Code</b><br>HE36   |                             | <b>48. Personnel Office ID</b><br>1189                                 |                               | <b>49. Approval Date</b><br>03/23/2021  |   |  |                              |  |  |   |  |  |



**NOTIFICATION OF PERSONNEL ACTION**

|   |   |                                      |                                 |
|---|---|--------------------------------------|---------------------------------|
| 1. Name (Last, First, Middle)<br>VASISHT, KAVEETA P | 2. Social Security Number<br>(b) (2), (b) (6) | 3. Date of Birth<br>(b) (2), (b) (6) | 4. Effective Date<br>02/28/2021 |
|---|---|--------------------------------------|---------------------------------|

| FIRST ACTION     |  | SECOND ACTION |                       |
|------------------|--|---------------|-----------------------|
| 5-A. Code<br>500 | 5-B. Nature of Action<br>CONV TO CAREER APPT                       | 6-A. Code     | 6-B. Nature of Action |
| 5-C. Code<br>ZLM | 5-D. Legal Authority<br>P.L. 114-255 SEC714(D)(1) DATED 12-13-2016 | 6-C. Code     | 6-D. Legal Authority  |
| 5-E. Code        | 5-F. Legal Authority   | 6-E. Code     | 6-F. Legal Authority  |

|   |  |
|---|--|
| 7. FROM: Position Title and Number<br>SUPERVISORY PHYSICIAN<br>PD:603980<br>POSITION:00422742 | 15. TO: Position Title and Number<br>SUPERVISORY PHYSICIAN<br>PD:210C3F<br>POSITION:00452012 |
|---|--|

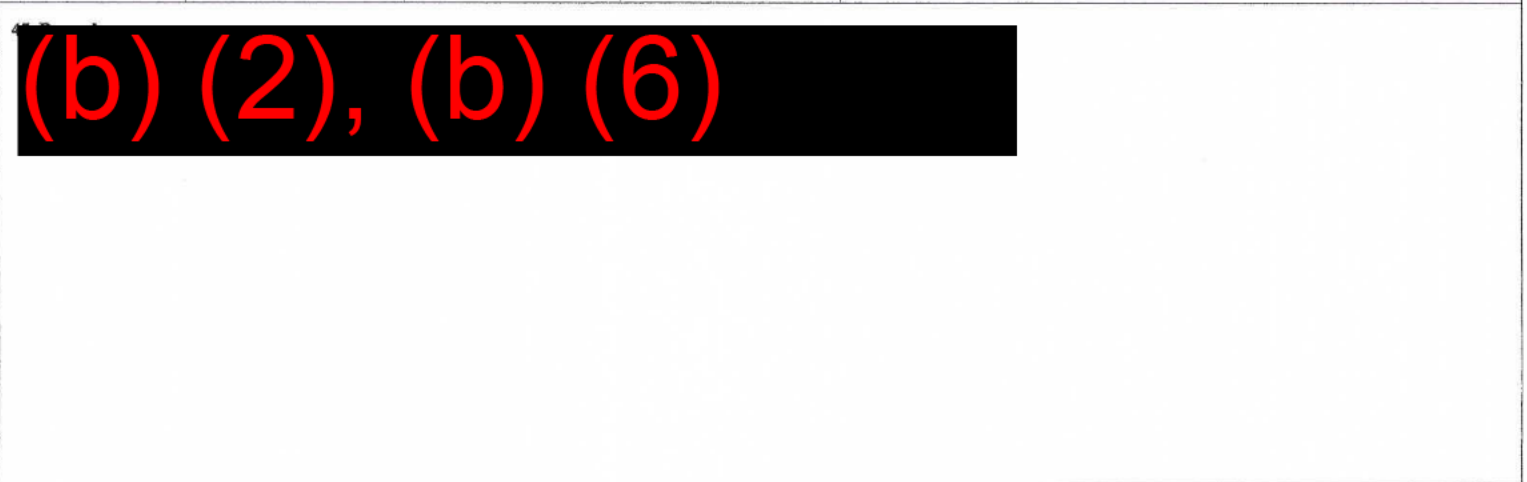
|                                |                                    |                                     |                        |                                  |                           |                                     |                       |                          |                        |  |                     |
|--------------------------------|------------------------------------|-------------------------------------|------------------------|----------------------------------|---------------------------|-------------------------------------|-----------------------|--------------------------|------------------------|--|---------------------|
| 8. Pay Plan<br>GP              | 9. Occ. Code<br>0602               | 10. Grade or Level<br>15            | 11. Step or Rate<br>05 | 12. Total Salary<br>\$269,237.00 | 13. Pay Basis<br>PA       | 16. Pay Plan<br>AD                  | 17. Occ. Code<br>0602 | 18. Grade or Level<br>00 | 19. Step or Rate<br>00 | 20. Total Salary/Award<br>\$275,999.00 | 21. Pay Basis<br>PA |
| 12A. Basic Pay<br>\$125,188.00 | 12B. Locality Adj.<br>\$144,049.00 | 12C. Adj. Basic Pay<br>\$269,237.00 | 12D. Other Pay<br>\$0  | 20A. Basic Pay<br>\$275,999.00   | 20B. Locality Adj.<br>\$0 | 20C. Adj. Basic Pay<br>\$275,999.00 | 20D. Other Pay<br>\$0 |                          |                        |  |                     |

|   |   |
|---|---|
| 14. Name and Location of Position's Organization<br>FOOD AND DRUG ADMINISTRATION<br>OFC OF WOMEN'S HEALTH<br>SILVER SPRING MD USA | 22. Name and Location of Position's Organization<br>FOOD AND DRUG ADMINISTRATION<br>OFC OF WOMEN'S HEALTH<br>SILVER SPRING MD USA |
|---|---|

|   |  |  |  |  |   |
|---|--|--|--|--|---|
| 23. Veterans Preference<br>(b) (2), (b) (6)       |  | 24. Tenure<br>1 0 - None 2 - Conditional<br>1 - Permanent 3 - Indefinite |  | 25. Agency Use                             | 26. Veterans Preference for RIF<br>(b) (2), (b) (6) |
| 27. FEGLI<br>(b) (2), (b) (6)                     |  | 28. Annuitant Indicator<br>(b) (2), (b) (6)                              |  | 29. Pay Rate Determinant<br>0 REGULAR RATE |   |
| 30. Retirement Plan<br>(b) (2), (b) (6)           |  | 31. Service Comp. Date (Leave)<br>(b) (2), (b) (6)                       |  | 32. Work Schedule<br>F FULL TIME           |   |
| 33. Part-Time Hours Per<br>Biweekly<br>Pay Period |  |  |  |  |   |

|  |  |  |                                    |                                    |
|--|--|--|------------------------------------|------------------------------------|
| 34. Position Occupied<br>1 1 - Competitive Service 3 - SES General<br>2 - Excepted Service 4 - SES Career Reserved |  | 35. FLSA Category<br>E E - Exempt<br>N - Nonexempt   | 36. Appropriation Code<br>169999HW | 37. Bargaining Unit Status<br>8888 |
| 38. Duty Station Code<br>241450031   |  | 39. Duty Station (City - County - State or Overseas Location)<br>SILVER SPRING MONTGOMERY MD USA |                                    |                                    |

|                 |     |     |     |                    |
|-----------------|-----|-----|-----|--------------------|
| 40. Agency Data | 41. | 42. | 43. | 44.<br>PAR NUMBER: |
|-----------------|-----|-----|-----|--------------------|



|   |                                 |   |  |
|---|---------------------------------|---|--|
| 46. Employing Department or Agency<br>DEPARTMENT OF HEALTH AND HUMAN SERVICES |                                 | 50. Signature/Authentication and Title of Approving Official<br>ELECTRONICALLY SIGNED BY: MELANIE M. KELLER<br>DIRECTOR, OFF OF TALENT SOLUTI |  |
| 47. Agency Code<br>HE36   | 48. Personnel Office ID<br>1189 | 49. Approval Date<br>03/01/2021   |  |