

APPLICATION FORM

Professional Development Series for Employee Relations Practitioners



Partnership and Labor Relations
U.S. Office of Personnel Management
1900 E Street, NW, Room #7H28
Washington, DC 20415

E-mail: EMPLOYEEACCOUNTABILITY@OPM.GOV

October 11-14, 2016

Location: U.S. Office of Personnel Management, 1900 E St. NW, Washington, D.C. 20415

Additional course details will be provided to selectees in the acceptance notice.

NOTE: Only applications that are typed on this form AND transmitted by clicking the submit button below will be considered.

Handwritten or Faxed Applications Will Not Be Considered

Applicant's Name: _____ Phone Number: _____

Title, Grade and Series: _____ Email Address: _____

Agency/Organization: _____

Address: _____

Notices concerning course acceptance will be sent by Tuesday, September 13, 2016.

1. What percentage of applicant's work involves Employee Relations (ER) (e.g., adverse and performance-based actions)? _____%
2. List the **total** number of years of ER work experience applicant has in the Federal government. _____
3. Does the applicant service organizations that have bargaining unit employees? Yes _____ No _____
4. Please state any accommodations required: _____

Please note that the supervisor's signature is required. If the supervisor cannot use the digital signature block, an e-mail from the supervisor approving the nomination(s) must be received at the registration email address by the application deadline. In the subject line, please include "October PDS for Practitioners."

Applicant's Supervisor

Name: _____ Title: _____

For Use Only If Supervisor Can Not Use

Digital Signature

Digital Signature: _____ Will Supervisor Send Email? State YES: _____

Phone Number: _____ Number of Applicants Submitted: _____

Email Address: _____ Order of Preference of this Applicant: _____

Application Deadline – Friday, September 9, 2016

Questions about registration? Call 202-606-2930 or
email: EMPLOYEEACCOUNTABILITY@OPM.GOV