

Mandatory Reference: 499
Supplementary Reference: N/A
File Name: 49952cm2

CONDITIONS OF EMPLOYMENT EMPLOYEES CONVERTED FROM A REGULAR APPOINTMENT

I, the undersigned Foreign Service employee of USAID, understand and agree that:

1. My appointment as _____ title, class _____ for duty at USAID/(Post) _____ has been converted to resident status effective _____ because _____ (reason) _____.
2. My resident appointment is limited to the need of my services at this post and shall be terminated when the need no longer exists, as determined by the post or by USAID/W.
3. I am not eligible for transfer to any other post as a resident employee.
4. Effective as of the date of conversion, I am no longer entitled to payment of any allowances or differential, except Post Allowance and Danger Pay, if granted for the post.
5. I am not eligible for Rest and Recuperation Travel except as a dependent of an employee who is eligible for such travel.
6. I am not eligible, for medical benefits, other than immunizations authorized for the post and use of the post health unit facilities, under the Health Benefits Program except as a dependent of a covered employee.
7. I shall be eligible for the accrual and granting of Home Leave and Home Leave Travel only if I complete my original prescribed tour of duty and if I am authorized to return to this post for full-time duty as a resident employee.
8. If I elect to travel for home leave purposes under my own travel authorization, I am not eligible for travel as a dependent of my spouse when my spouse becomes eligible for home leave travel. (Use only when employee and spouse are both eligible for home leave travel at U.S. Government expense.)

9. If I am eligible for return travel to the United States for separation purposes, I must exercise this option within twelve months, or forfeit it.
10. I am eligible for continued storage of household and personal effects (a) for the balance of my initially prescribed tour or (b) until my spouses's weight allowance is increased because of a change in marital status, whichever is earlier. (Include item (b) only when resident employee and spouse are both employees of a U.S. Government agency.)
11. If I have reemployment rights to a Federal agency, I must exercise them within 30 days or forfeit them.

Signature

Date

Witnessed:

Executive Officer or Personnel Officer

(Date)

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