1. Date of birth	2. Social security number	3. Tenure group	4. Service comp. date	5. Veteran preference
				1. None 3. 10 Pt. 5. 10 Pt. Other 2. 5 Pt. Disab. 6. 10 Pt./30%

6. FEGLI	7. Retirement	7-A. Annuitant Indicator	8. Current performance rating and date *(use pencil)*
	1. CS 3. FS 5. Other 2. FICA 4. None 6. CS Special	1. RETO 3. RETM 2. Reempl. Annuitant	

9. Additional information and remarks *(training, skills, education, etc.)*

9-A. Employee's forwarding address *(street number, city, state, ZIP code)*

10. Current employment record

Nature of action	Effective date	Position, title, and number	Pay plan, occupation code, grade, and step	Salary or pay rate	Organization, head-quarters and location

11. Follow-up dates	(A) Within grade	(B)	(C)	(D)	(E)	(F)
(G)	(H)	(I)	(J)	(K)	(L)	(M)

12. Name *(CAPS) (Last, first, middle)*	13.

7-112

SERVICE RECORD

Standard Form 7 (Rev 12-80)
U.S. Office of Personnel Management
FPM Supp. 293-31

TEAR OFF AFTER TYPING

Previous Edition Usable NSN 7540-00-634-3962

This form was electronically produced by Elite Federal Forms, Inc.

Name	If OPF sent to NPRC, check here.	OPF sent to: *(Agency name and address)*
Date OPF forwarded after employee's separation	If OPF sent to another → agency, complete :	

Current employment record *(continued)*

Nature of action	Effective date	Position, title, and number	Pay plan, occupation code, grade, and step	Salary or pay rate	Organization, head-quarters and location