

## Presidential Management Fellows (PMF) Program Appointment Intake Form

## **PRIVACY ACT STATEMENT:**

**Authority:** 5 CFR 362.103 authorizes participating Federal agencies to make an appointment under the Pathways Programs (including the Presidential Management Fellows (PMF) Program) to a position defined in 5 CFR 213.3402.

**Purpose:** This PMF Appointment Intake Form is used to collect appointment information (including acceptance of a tentative PMF appointment offer) of a Finalist or Fellow, and submit to the Agency PMF Coordinator and PMF Program Office, including any updates to the initial appointment or reappointments.

Routine Uses: The information will be used by the PMF Program Office and Agency PMF Coordinator to process PMF appointments (e.g., initial appointment, reappointment, or updates) within their agency and record in the PMF Program's Talent Management System (PMF TMS).

**Disclosure:** Use of this form and furnishing this information is optional; however, it is designed to ensure accurate information is collected and recorded. Agencies may use alternative formats.

## **INSTRUCTIONS:**

**Fellows:** A newly appointed Finalist or reappointed Fellow may obtain this form from the PMF website at <a href="www.pmf.gov">www.pmf.gov</a>. Upon accepting or starting an initial PMF appointment, the Finalist/Fellow should fill out this form and submit a copy to their Agency PMF Coordinator and fax/email a copy to the PMF Program Office at 202-606-3040 or <a href="mailto:pmf.gov">pmfapplication@opm.gov</a>. The Fellow can confirm proper recording by contacting their Agency PMF Coordinator. A list of Agency PMF Coordinators can be found on the PMF website. Use this form to also submit updated appointment information (e.g., work email/phone number upon starting appointment).

**Agency PMF Coordinator:** Upon receipt, record appointment information within your agency's human resources system and log into the PMF TMS to record the appointment, reappointment, or update. The PMF Program Office may have initially recorded the appointment information; however, you should ensure all such information is accurate. Once the appointment is recorded, ensure other program requirements are followed (e.g., signed Participant Agreement, creation of an Individual Development Plan, issuance of Performance Standards, assignment of a Mentor, and reimbursement of PMF placement fee). Please ensure the appointing office submits reimbursement to the PMF Program Office. Retain copy for your records.

**PMF Program Office:** Upon receipt, record information in the PMF TMS.

Reason (check one):	In	itial Appointment	Reappointment		Update			Other		
PMF's Name (first and						PMF's Class Year (yyyy):				
Appointment Opportunity Announcement Number (this is needed to associate your appointment to an announcement):										
Full Agency Name (headquarters):										
Full Sub-Agency Name (if applicable):										
Hosting Organization										
Target Entry on Duty (EOD) Start Date (if actual start date is unknown; mm/dd/yyyy):								al Entry on Duty (EOD) Date (mm/dd/yyyy):		
Pay Schedule and Grade Level Upon Initial Appo (e.g., GS-9, 11, 12, or equivalent):			intment Job Series of Position				ies of Position (e.g., 0343):			
Position Title (e.g., Program Analyst	):		Target Grade Level of Position (e.g., GS-13					Position (e.g., GS-13):		
PMF's Work Email Address:						Vork Ph -####)	one Nu	umber:		
PMF Supervisor's Name (first and last):			PMF Supervisor's Phone Number: (###-###-####)				one Number:			
PMF Supervisor's Wor Email Address:	k		PMF's Wor			Vork Du	ty Loc	ation (City, State):		
Any Recruitment Incentive Associated to this Appointment (e.g., student loan repayment, relocation, etc.; Yes or No):										
Level of Background Investigation/Security Clearance Associated to this Appointment (e.g., Public Trust, Confidential, Secret, Top Secret, Top Secret/SCI, or Other; enter appropriate category):										
Comments (if any):										