

STANDARD FORM 52
PROULGATED BY THE
U. S. CIVIL SERVICE COMMISSION
JANUARY 1967 FEDERAL PERSONNEL
MANUAL CHAPTER RI

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname) Mrs. Anna Tarasoff	2. DATE OF BIRTH 5 May 1923	3. REQUEST NO.	4. DATE OF REQUEST 26 June 57
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
B. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED:	

FROM— Clerk OS-0301.26-4 BU #5423 \$3415.00 p.a. DDS/Office of Personnel Personnel Assignment Division Placement Branch (Clerical) Interim Assignment Section Washington, D. C.	8. POSITION TITLE AND NUMBER	TO— Clerk OS-0301.26-4 BVP-8073.12/907-4 \$3415.00 p.a. DDP/FI Staff Division D Project Annex Project [P B] Jointly Branch 2 Section B Washington, D. C.
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	9. SERVICE, GRADE, AND SALARY	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL
	10. ORGANIZATIONAL DESIGNATIONS	
	11. HEADQUARTERS	
	12. FIELD OR DEPARTMENTAL	

A. REMARKS (Use reverse if necessary)
Present incumbent is pending reassignment.

B. REQUESTED BY (Name and title)	D. REQUEST APPROVED BY
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) 03 July Walt x 4281	Signature: _____ Title: _____

13. VETERAN PREFERENCE	14. POSITION CLASSIFICATION ACTION
NONE WWII OTHER 5-PT. 10-POINT DISAB. OTHER X	NEW VICE I. A. REAL SD:DS

15. SEX F	16. APPROPRIATION FROM: 7-6509-20 TO: 7-2306-23	17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes	18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY) 8 April 1957	19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: D. C.
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20. STANDARD FORM 50 REMARKS: _____
Date: _____
Security: _____
granted for _____

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS:
A.			RETURN TO CIA Background Use Only Do Not Reproduce
B. CEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			

F. APPROVED BY

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