Standard Form 50 Rev. 7/91 U.S. Office of Personnel Management FPM Supp. 296–33, Subch. 4

## NOTIFICATION OF PERSONNEL ACTION

DHS-001-01896-000217

| 11 M Supp. 270 50, Sub                                                                                                                                                                                                                                                                                                       |                                                     |                                              |                                    |                                                                        |                                 |                                    |                                         |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------|------------------------------------|------------------------------------------------------------------------|---------------------------------|------------------------------------|-----------------------------------------|--|--|--|
| 1. Name (Last, First, Middle) MCGOVERN, HELEN MARY BRIDGET                                                                                                                                                                                                                                                                   |                                                     |                                              |                                    | 2. Social Security Num (b)(6)                                          | 3. Date of Bir<br>(b)(6)        | 4. Effective Date 03/01/2021       |                                         |  |  |  |
| FIRST ACTIO                                                                                                                                                                                                                                                                                                                  |                                                     |                                              |                                    | SECOND ACTIO                                                           | )N                              |                                    |                                         |  |  |  |
| 5-A. Code                                                                                                                                                                                                                                                                                                                    | 5-B. Nature of Action                               |                                              |                                    | 6-A. Code 6-B. Nature of Action                                        |                                 |                                    |                                         |  |  |  |
| 190                                                                                                                                                                                                                                                                                                                          | PROVISIONAL APPT                                    | NTE 03/02/21                                 |                                    |                                                                        |                                 |                                    |                                         |  |  |  |
| 5-C. Code<br>Y9K                                                                                                                                                                                                                                                                                                             | 5-D. Legal Authority<br>SCH C 213.3302(A)           |                                              |                                    | 6-C. Code 6-D. Legal Authority                                         |                                 |                                    |                                         |  |  |  |
| 5-E. Code                                                                                                                                                                                                                                                                                                                    | 5-F. Legal Authority                                |                                              |                                    | 6-E. Code 6-F. Legal Authority                                         |                                 |                                    |                                         |  |  |  |
| 7 FROM Position                                                                                                                                                                                                                                                                                                              | Tide and Namehon                                    |                                              |                                    | 15 TO Desiring Title and Number                                        |                                 |                                    |                                         |  |  |  |
| 7. FROM: Position Title and Number                                                                                                                                                                                                                                                                                           |                                                     |                                              |                                    | 15. TO: Position Title and Number<br>SENIOR ADVSIOR<br>90997015 083881 |                                 |                                    |                                         |  |  |  |
| 8. Pay Plan 9. Occ. Cod                                                                                                                                                                                                                                                                                                      | le 10. Grade or Level 11. Step or                   | Rate 12. Total Salary                        | 13. Pay Basis                      | 16. Pay Plan 17. Occ. Cod<br>GS 0301                                   | e 18. Grade or Level            |                                    | . Total Salary/Award 21. Pay Basis PA   |  |  |  |
| 12A. Basic Pay                                                                                                                                                                                                                                                                                                               | 12B. Locality Adj. 12C. A                           | dj. Basic Pay                                | 12D. Other Pay .00                 | 20A. Basic Pay<br>110,460.00                                           | 20B. Locality Adj.<br>33,668.00 | 20C. Adj. Basi<br>144,128.0        |                                         |  |  |  |
| 14. Name and Location of Position's Organization  22. Name and Location of Position's Organization  IMMEDIATE OFFICE OF THE SECRETARY  OSEM  OFFICE OF POLICY  IMM OFFICE OF THE UNDERSEC                                                                                                                                    |                                                     |                                              |                                    |                                                                        |                                 |                                    |                                         |  |  |  |
| EMPLOYEE                                                                                                                                                                                                                                                                                                                     | DATA                                                |                                              |                                    | HS OS0112010000000                                                     | 000 PP 05 2021                  |                                    |                                         |  |  |  |
| 23. Veterans Prefere                                                                                                                                                                                                                                                                                                         |                                                     |                                              |                                    | 24. Tenure                                                             | 25. Ag                          | gency Use 26.                      | Veterans Preference for RIF             |  |  |  |
| (b)(6) 1 - None<br>2 - 5-Point                                                                                                                                                                                                                                                                                               | 3 – 10–Point/Disability<br>4 – 10–Point/Compensable | 5 – 10–Point/Other<br>6 – 10–Point/Compensab | le/30%                             | (b)(6) 0 - None 2 - Conditional<br>1 - Permanent 3 - Indefinite        |                                 |                                    | (b)(6)                                  |  |  |  |
| 27. FEGLI                                                                                                                                                                                                                                                                                                                    |                                                     |                                              |                                    | 28. Annuitant Indicator 29. Pay Rate                                   |                                 |                                    | Pay Rate Determinant                    |  |  |  |
| (b)(6)                                                                                                                                                                                                                                                                                                                       |                                                     |                                              |                                    |                                                                        |                                 |                                    |                                         |  |  |  |
| 30. <b>Retirement Plan</b> (b)(6)                                                                                                                                                                                                                                                                                            |                                                     | 31. Service C                                | Comp. Date (Leave)                 | F FULL TIME                                                            |                                 | 33.                                | Part-Time Hours Per Biweekly Pay Period |  |  |  |
| POSITION D                                                                                                                                                                                                                                                                                                                   | ATA                                                 |                                              |                                    |                                                                        |                                 |                                    |                                         |  |  |  |
| 34. Position Occupied  35. FLSA Category  1 - Competitive Service 3 - SES General (b)(6) E - Exempt                                                                                                                                                                                                                          |                                                     |                                              | 36. Appropriation Code             |                                                                        |                                 | 37. Bargaining Unit Status<br>8888 |                                         |  |  |  |
| 2 2 - Excepted Ser  38. Duty Station Co                                                                                                                                                                                                                                                                                      | 2.5                                                 |                                              | - Nonexempt<br>tion (City – County | - State or Overseas Locat                                              | ion)                            | 00                                 | 100                                     |  |  |  |
| 11-0010-001                                                                                                                                                                                                                                                                                                                  |                                                     | WASHING                                      | TON DIST OF                        | COLUMBIA DC                                                            |                                 |                                    |                                         |  |  |  |
| 40. Agency Data                                                                                                                                                                                                                                                                                                              | 41.                                                 | 42.                                          | 43.                                | 44.                                                                    |                                 |                                    |                                         |  |  |  |
| 45. Remarks APPT IS ON A PROVISIONAL BASIS. YOU ARE ELIGIBLE FOR RETIREMENT COVERAGE FOR FEHB AND FEGLI. IF YOUR PERFORMANCE IS SATISFACTORY, & YOU MEET ALL LEGAL QUALIFICATIONS & OTHER APPLICABLE REQMTS, YOU MAY BE CONVERTED TO NONTEMP APPT BEFORE THIS APPT EXPIRES. APPOINTMENT AFFIDAVIT EXECUTED 03/01/2021 (b)(6) |                                                     |                                              |                                    |                                                                        |                                 |                                    |                                         |  |  |  |
| APPOINTMENT                                                                                                                                                                                                                                                                                                                  |                                                     |                                              | 021                                |                                                                        |                                 |                                    |                                         |  |  |  |
| APPOINTMENT                                                                                                                                                                                                                                                                                                                  | I AFFIDAVIT EXECU                                   |                                              | 021                                | 50. Signature/Authentic                                                | ration and Title of Ar          | pproving Official                  |                                         |  |  |  |
| APPOINTMENT (b)(6)                                                                                                                                                                                                                                                                                                           | T AFFIDAVIT EXECU                                   |                                              | 021                                | 50. Signature/Authentic                                                |                                 | pproving Official                  |                                         |  |  |  |
| APPOINTMENT (b)(6)  46. Employing Depart                                                                                                                                                                                                                                                                                     | T AFFIDAVIT EXECU                                   |                                              |                                    |                                                                        | Y SIGNED BY:                    | pproving Official                  |                                         |  |  |  |

Standard Form 50 Rev. 7/91 U.S. Office of Personnel Management FPM Supp. 296–33 Subch. 4

## NOTIFICATION OF PERSONNEL ACTION

DHS-001-01896-000216

| FPM Supp. 296-33, Sub                                                                                             | CII. 4                                                               |                                              |                                                                                                                                                                        |                                                          |                                                                                        |                  |                       |                                    |                                      |                     |  |
|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------------------------------------|------------------|-----------------------|------------------------------------|--------------------------------------|---------------------|--|
| 1. Name (Last, First, Middle) MCGOVERN, HELEN MARY BRIDGET                                                        |                                                                      |                                              |                                                                                                                                                                        | 2. Social Security Number (b)(6) 3. Date of Birth (b)(6) |                                                                                        |                  | th                    | 4. Effective Date 03/02/2021       |                                      |                     |  |
| FIRST ACTIO                                                                                                       | ON                                                                   |                                              |                                                                                                                                                                        | SECOND AC                                                | TION                                                                                   |                  |                       |                                    |                                      |                     |  |
| 5-A. Code                                                                                                         | 5-B. Nature of Action                                                |                                              |                                                                                                                                                                        | 6-A. Code                                                | 6-B. N                                                                                 | ature of Action  |                       |                                    |                                      |                     |  |
| 546                                                                                                               | CONV TO SES NONCA                                                    | AREER APPT                                   |                                                                                                                                                                        |                                                          |                                                                                        |                  |                       |                                    |                                      |                     |  |
| 5-C. Code<br>V4L                                                                                                  | 5-D. Legal Authority<br>5 USC 3394(A) NONCA                          | 6-C. Code                                    | 6-C. Code 6-D. Legal Authority                                                                                                                                         |                                                          |                                                                                        |                  |                       |                                    |                                      |                     |  |
| 5-E. Code<br>AWM                                                                                                  | 5-F. Legal Authority<br>OPM FORM 1652                                | 6-E. Code 6-F. Legal Authority               |                                                                                                                                                                        |                                                          |                                                                                        |                  |                       |                                    |                                      |                     |  |
| 7. FROM: Position 7<br>SENIOR ADVSI<br>90997015 083881                                                            | OR                                                                   |                                              |                                                                                                                                                                        | 15. TO: Position Tit<br>ASSISTANT SI<br>90967582 08077   | ECRETAI                                                                                |                  | ADE & ECO             | NOM                                |                                      |                     |  |
| 8. Pay Plan 9. Occ. Cod                                                                                           | le 10. Grade or Level 11. Step or 15 01                              | Rate 12. Total Salary 144,128.00             | 13. Pay Basis<br>PA                                                                                                                                                    | 16. Pay Plan 17. Occ<br>ES 030                           |                                                                                        | . Grade or Level | 19.Step or Rate       | 20. Total Sal<br>183,100.          |                                      | 21. Pay Basis<br>PA |  |
| 12A. Basic Pay<br>110,460.00                                                                                      |                                                                      | Adj. Basic Pay<br>4,128.00                   | 12D. Other Pay                                                                                                                                                         | 20A. Basic Pay<br>183,100.00                             |                                                                                        | B. Locality Adj. | 20C. Adj. E<br>183,10 | -                                  | 20D. Other                           | Pay                 |  |
| IMMEDIATE OF<br>OSEM<br>OFFICE OF POL                                                                             | F THE UNDERSEC                                                       |                                              | 22. Name and Location of Position's Organization IMMEDIATE OFFICE OF THE SECRETARY OSEM OFFICE OF POLICY TRADE AND ECONOMIC SECURITY  HS OS0112110000000000 PP 05 2021 |                                                          |                                                                                        |                  |                       |                                    |                                      |                     |  |
| 23. Veterans Prefere                                                                                              |                                                                      |                                              |                                                                                                                                                                        | 24. Tenure                                               |                                                                                        |                  | ency Use              | 26. Veteran                        | s Preferenc                          | e for RIF           |  |
| (b)(6) 1 - None<br>2 - 5-Point                                                                                    | 3 – 10–Point/Disability<br>4 – 10–Point/Compensable                  | 5 – 10–Point/Other<br>6 – 10–Point/Compensab | le/30%                                                                                                                                                                 | (b)(6) 0 - None<br>1 - Permanen                          | 2 - Condi<br>t 3 - Indefi                                                              |                  |                       | (b)(6)                             |                                      |                     |  |
| 27. FEGLI                                                                                                         |                                                                      |                                              |                                                                                                                                                                        | 28. Annuitant Indicator                                  |                                                                                        |                  |                       | 29. Pay Rate Determinant           |                                      |                     |  |
| (b)(6)                                                                                                            |                                                                      |                                              |                                                                                                                                                                        | ,                                                        |                                                                                        |                  |                       |                                    |                                      |                     |  |
| 30. Retirement Plan<br>(b)(6)                                                                                     | 1                                                                    | 31. Service C                                | Comp. Date (Leave)                                                                                                                                                     | 32. Work Schedule F FULL T                               | IME                                                                                    |                  |                       |                                    | me Hours l<br>Biweekly<br>Pay Period | Per                 |  |
| POSITION D                                                                                                        | ATA                                                                  |                                              |                                                                                                                                                                        |                                                          |                                                                                        |                  |                       |                                    |                                      |                     |  |
| 34. Position Occupied  35. FLSA Category  1 - Competitive Service 3 - SES General (b)(6) E - Exempt N - Nonexempt |                                                                      |                                              | - Exempt                                                                                                                                                               | 36. Appropriation Code                                   |                                                                                        |                  |                       | 37. Bargaining Unit Status<br>8888 |                                      |                     |  |
| 38. Duty Station Co.                                                                                              |                                                                      | 39. Duty Sta                                 | tion (City – County                                                                                                                                                    | y – State or Overseas L<br>COLUMBIA DC                   | ocation)                                                                               |                  |                       |                                    |                                      |                     |  |
| 40. Agency Data                                                                                                   | 41.                                                                  | 42.                                          | 43.                                                                                                                                                                    | 44.                                                      |                                                                                        |                  |                       |                                    |                                      |                     |  |
| (b)(6)  TENURE AS USERVICE. ALL INFORMA                                                                           | EFERENCE IS NOT A USED FOR 5 USC 35 ATION SUBJECT TO RSONNEL FOLDER. | 02 IS NOT A                                  | PPLICABLE T                                                                                                                                                            | O THE SENIOR                                             | EXECU:                                                                                 |                  |                       |                                    |                                      |                     |  |
| 46. Employing Department or Agency HOMELAND SECURITY                                                              |                                                                      |                                              |                                                                                                                                                                        |                                                          | 50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY: |                  |                       |                                    |                                      |                     |  |
| 47. Agency Code 48. Personnel Office ID 49. Approval Date                                                         |                                                                      |                                              |                                                                                                                                                                        | NICOLE C. BARKSDALE-PERRY                                |                                                                                        |                  |                       |                                    |                                      |                     |  |
| HSAA                                                                                                              | 5500                                                                 | 03/03/202                                    |                                                                                                                                                                        | ACTING EXECUTIVE DIRECTOR, HRMS                          |                                                                                        |                  |                       |                                    |                                      |                     |  |