

## RETENTION ALLOWANCE JUSTIFICATION FORM

**Employee Name:**

**SSN:**

**Activity:**

**Organization/Code:**

**Position (Title/Series/Grade):**

I have reviewed the criteria for offering retention allowances as outlined in 5 CFR 575 and my activity policy. I have determined that its use is necessary based on the unusually high and unique qualification of this employee and/or a special need of this Activity for the employee's services, which makes it essential to retain the employee. In arriving at this determination, I fully considered each of the following factors as is described in my narrative justification below:

1. The extent to which the employee's departure would affect this Activity's ability to carry out an activity or perform a function that is deemed essential to the Command's mission
2. The success of recent effort to recruit candidates and retain employees with qualifications similar to those possessed by the employee for positions similar to the position held by the employee; and
3. The availability in the labor market of candidates for employment who, with minimal training or disruption of service to the public, could perform the full range of duties and responsibilities assigned to the position held by the employee.

**NARRATIVE JUSTIFICATION:**

**I certify** that absent payment of this retention allowance, this employee would likely leave Federal service and that the employee's skills are essential for accomplishing the Activity's mission.

I request that a retention allowance in the amount of \$ \_\_\_\_\_, which is equivalent to \_\_\_\_\_% of the candidate's salary, be approved for a period of \_\_\_\_\_ months.

In requesting this approval, I have given careful consideration to overall pay alignment within the organization and other salary management considerations and have determined that payment of this recruitment bonus is in the best interest of the government.

\_\_\_\_\_  
**Supervisor's Signature and Code**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Approving Official's Signature and Code**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Funding Approval Official**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**HRD Review**

\_\_\_\_\_  
**Date**