Notice of Volunteer/Trainee Action-HQ

Please Print

_____ _____ _____
First Name MI Last Name

_____ _____ _____
Volunteer ID No. Country of Service Training Class No.

For Terminations:

Effective Date: _____

Volunteer/ Trainee (circle one)

☐Resignation
☐Completion of Service
☐Administrative Separation
☐Medical Separation
☐Interrupted Service
☐Death

For Reinstatements:

Effective Date of Reinstatement: _____

New Projected COS Date: _____

New VAD Code: _____

New Training Class: _____

Note: Enter NTTRN if not attending training again.

Volunteer Forms (Registration, Life Insurance, Privacy Act Waiver, Banking Information):

☐Use forms on file

☐PCV/T will fill out new forms

Initiated By: _____ _____ _____
Signature and Title Office Date

FOR AGENCY USE ONLY

☐ APPROVED ☐ DISAPPROVED DATE RECEIVED _____ APPROVING FMS_____

PRIVACY ACT NOTICE: This notice is provided under the Privacy Act of 1974, as amended (5 U.S.C. §552a). The information requested is collected under the authority of the Peace Corps Act, 22 U.S.C. §2501 et seq., for the purpose of informing of a notice of volunteer/ trainee action. The information may also be used for routine uses listed in the System of Records Notice PC-22, Financial Management System, available in our electronic reading room at http://www.peacecorps.gov. Providing the material herein is completely voluntary, however failure to disclose sufficient information may result in loss of certain benefits.

Peace Corps