

Employee's Agency: _____

Personnel Officer: _____

Agency Address: _____

FAX: _____

For Verification FAX To:

Oh Army Nat'l Guard : 614-336-7373

Oh Air Nat'l Guard : 614-336-7078

Separated Oh Nat'l Guard:614-336-7305

NOTE: Submit completed form to the employee's personnel officer for submission to DAS for approval.

SUBJECT: Application to Claim Annual Leave Accrual Credit for Prior Service in the Ohio National Guard.

References:

- Section 9.44 (ORC)
- Section 124.181 (E) (ORC)
- OCSEA Arbitration Award 27-32-(00-03-10)-0245-01-03

OHIO NATIONAL GUARD PRIOR SERVICE INFORMATION:

1. _____
Last Name First MI

2. _____
SS#

3. _____
Date of initial entry or transfer to ONG

4. Branch of National Guard Service
Army _____ Air _____

5. Service History Dates (ONG only)

From _____ To _____

From _____ To _____

From _____ To _____

6. _____
Current Unit of Assignment

7. _____
Total Credit Claimed
(Days, Months, Years)

Date

Signature (Employee)

Information above has been verified by: *(Employee of Adj. General's office)*

Print Name

Sign Name

Date

Title: _____

NOTE: The effective date of such adjustments will be the first day of the pay period in which DAS receives the Personnel Action. No employee, other than an employee who submits proof of prior service within ninety (90) days after the date of the employee's hiring, will receive retroactive accrual or longevity adjustment for the period prior to the director's approval of prior service credit.