- 1. Agency:
- 2. Activity:
- 3. Location:
- 4. Union/Local:

Check Applicable Item(s)					
5. Recognition:	New Recognition Unit Abolished Recognition Unit Revised Recognition Unit Other:		BUS Code: BUS Code:		
	Date of Recognit	of Recognition or Change:			
	Unit Description:				
	National Exclusiv	e: Yes	No		
	National Consulta	ation Rights	Yes	No	
Check Applicable Item(s)					
6. Agreement: Initial (First) Agreement Renegotiated Agreement Amendment or Supplement to Existing Agreement Change in Agreement Expiration Date Other:					
	BUS Code (if applicable): Effective Date of Agreement:				
	Expiration Date of Agreement:				
	Duration:	Automatic R	lenewal	Indefinite	
	Multi-Unit:	Yes	No		
7. Employees in Recognition Unit:		Professiona	1		
		Wage			
		Other GS			
		TOTAL			

- 8. Name of Reporting Official:
 - Title of Reporting Official:
 - Telephone Number:
 - Date: