



UNITED STATES OFFICE OF PERSONNEL MANAGEMENT
Washington, DC 20415

Suitability Executive
Agent Programs

Agency Action Notification Form

Date of Notification:

Individual Information

- Full Name:
- DOB: SSN:
- Position Title / Series / Grade:
- Appointment Type (Competitive/Senior Executive Service):
- EOD / Appointment Date:
- Employment Status:

Type of Agency Action Taken *Describe the agency's final action taken under its independent authority (e.g., removal under agency authority, agency debarment, final security clearance revocation, etc.)*

Effective Date of Agency Action:

Authority Used *(regulatory/statutory citation):*

Basis for the Agency Action (Provide a concise and factual summary consisting of 2-4 sentences of the conduct that forms the basis for the agency action including relevant details, timeline, and how the conduct was established.)

Primary Source(s) of Evidence Relied Upon:

- | | |
|--|--|
| ☐ OIG investigation report | ☐ LOI and employee response |
| ☐ Internal administrative investigation | ☐ Completed background investigation |
| ☐ Security or CV-related findings | ☐ Other: Click or tap here to enter text. |
| ☐ Court/criminal documents | |
| ☐ Access or System Discrepancies | |
| ☐ Emails, memos, or witness statements | |

Does the Conduct Involve Any Suitability Factors (5 CFR 731)? *If yes, please describe the suitability factors that are implicated. As applicable, please also describe relevant additional considerations.*

- If the conduct involved suitability factor, but a suitability action was not taken and/or a referral to OPM was not made, please explain why.
- Are there any pending internal or external actions related to this conduct (e.g., security review, EEO case, grievance, MSPB appeal, criminal matter)? If yes, briefly describe.
- How was the conduct initially identified (e.g., supervisor report, CV alert, complaint, internal review, automated system, etc.)?

Agency Information

Agency Name:

Point of Contact Name (e.g., Security Office, Human Resource, etc.):

Title/Office:

Email:

Phone:

Submit the completed form to the Suitability Referrals email box via the NP2 Secure Portal.

For questions or assistance completing this notification form, please contact SuitEA at 202-599-0090.