

# New Employee General In-processing Forms

**Forms must be completed prior to in-processing. Please bring completed forms first day.**

Here you will find attachments and links necessary for us to process your appointment, for you to receive your first paycheck, and for you to finalize legal documents for Federal employment with Department of Veterans Affairs.

***Make sure you read all instructions.***

You must have Adobe Acrobat Reader to access these forms.

<p><a href="#">Declaration Of Federal Employment (OF-306)</a></p>	<p>This form is used to determine your suitability for Federal employment and your current enrollment status in the Government's Life Insurance program. All your answers must be truthful and complete. A false statement on any part of this declaration or attached forms or sheets may be grounds for not hiring you, or for firing you after you begin work. Signature required on 17a and date.</p>
<p><a href="#">Prior Federal Service (SF-144)</a></p>	<p>This form is used to list all of your Federal government civilian and uniformed service. <b>If you have not had any of these, Mark Yes on question 4 and fill in question 8.</b> Make sure you sign the document and date.</p>
<p><a href="#">Ethnicity and Race Identification (SF-181)</a></p>	<p>This form is used to collect statistical information on the composition of the workforce.</p>
<p><a href="#">Employment Eligibility Verification (I-9)</a></p>	<p>Complete Section 1. Bring two forms of ID the first day of employment for verification. List of acceptable documents are listed.</p>
<p><a href="#">Self Identification Of Reportable Handicap (SF-256)</a></p>	<p>This form is used to collect statistical information for agency reports on hiring, placement, and advancement of handicapped individuals. Complete personal information in top boxes. Find code which describes the impairment. Enter code in the top right hand box.</p>
<p><a href="#">Designation of Unpaid Compensation (SF1152)</a></p>	<p>This form is to designate a beneficiary to receive your last paycheck if something should happen to you while you were still an employee at Southwestern Power Administration. Complete Section A and Section B.</p>
<p><a href="#">Employee's Withholding Allowance Certificate (W-4 Form)</a></p>	<p>Complete this form so that the correct federal income tax is withheld from your paycheck. In Oklahoma, state tax withholding is the same as federal.</p>
<p><a href="#">Direct Deposit Sign-Up Form (FMS-2231)</a></p>	<p>Please fill out Section 1, 2, 3, and sign 5. (Type of payment will be Net Pay) Make sure routing number is correct along with your account number. <b>Last digit of routing number will go in check digit box.</b></p>
<p><a href="#">Education Data Update Form</a></p>	<p>This form is used to reflect your highest education level achieved. Determine which code best describes your highest level of education and enter it on the top right.</p>
<p><a href="#">Employee Address Form</a></p>	<p>Address information for emergency situations.</p>
<p><a href="#">Background Investigation Memorandum</a></p>	<p>Read over. Need signature and date.</p>
<p><a href="#">Standards of Ethical Conduct for Executive Branch Employees (FOR YOUR RECORDS)</a> <a href="#">Employee Conduct Certification Form</a></p>	<p>Information on the ethical standards for federal employees. This is for your records only, DON'T BRING TO ORIENTATION. Print and sign this form</p>

## Federal Benefits Forms and Information

Here you will find attachments and links necessary for us to process your benefits as a federal employee. You have 31 calendar days from the date of your appointment to elect life insurance and 60 calendar days to elect health benefits. You may bring these forms completed to new employee orientation or make an election at a later time.

***Make sure you read all instructions.***

[You must have Adobe Acrobat Reader to access these forms.](#)

<a href="#">New Employee Benefits Information</a>	Overview of Health, Life, Dental, Vision, Flexible Spending and Long Term Care Insurance in a Question and Answer format.
<a href="#">2009 Benefits Guides</a>	Provide basic information on federal benefits and help you make informed choices on your benefits elections
<a href="#">Summary of the Thrift Savings Plan</a>	Overview of the Thrift Savings Plan (the foundation of FERS Retirement System)
<a href="#">FERS Retirement System</a>	Information on the Federal Employees Retirement System (FERS)
<a href="#">Health Benefits Election (SF 2809)</a>	FEHB Enrollment form. Follow the instructions on the form for completing the required blocks.
<a href="#">Life Insurance Election (SF 2817)</a>	Every employee is automatically enrolled in basic life insurance. Fill out this form, following the instructions on the form, to elect more life insurance or waive coverage all together.
<a href="#">Designation of Life Insurance Beneficiary (SF 2823)</a>	This form is to designate a beneficiary to receive your life insurance benefit if something should happen to you. This document supersedes a last will and testament.
<a href="#">Designation of FERS Beneficiary (SF 3102)</a>	This form is to designate a beneficiary to receive your retirement benefit if something should happen to you. This document supersedes a last will and testament.
<a href="#">TSP Election (TSP 1)</a>	To elect TSP contribution amount. Fill out sections I – IV.
<a href="#">Designation of TSP Beneficiary (TSP 3)</a>	This form is to designate a beneficiary to receive your TSP benefit if something should happen to you. This document supersedes a last will and testament. <b><i>You must mail or fax this form to the address/fax number in the instructions.</i></b>