

# **Certified Summary of Federal Service**

Civil Service Retirement System

#### **Information for Agency**

- 1. A certified copy of this form must accompany the employee's *Application for Immediate Retirement* (SF 2801) or an *Application for Death Benefits* (SF 2800) for a deceased employee if a survivor annuity appears to be payable.
- 2. This form may also be used:
  - · for retirement counseling purposes
  - to respond to an employee's request for a record of creditable service
- See the CSRS and FERS Handbook for Personnel and Payroll
  Offices for detailed instructions for completion and disposition of
  this form.

## **Instructions for the Employee**

- 1. Your employing office will complete and certify this form for you.
- 2. Review this form carefully. Be sure it contains all of your service.
- 3. Complete Section E, Employee's Certification, and return the form to your employing office.

Section A - Identification								
1. Name (last, first, middle)			2. Date of birth (mr.	n/dd/yyyy)	3. Social security number(s)			
4. List all other names used (maiden name, AKA, spelling variants)			5. Other birth dates	used	6. Military serial number			
			7. Service computar retirement purpos		Pay plan and occupational series			
9a. Does the applicant receive military retired pay?			9b. If Yes, has the applicant waived military retired pay to credit military service for civil service retirement?					
Yes (Attach a copy of the applicant's military retired pay order, if available, and complete 9b.)			Yes (Attach a copy of the military finance center's letter to the employee accepting waiver, if available.)					
No			No (Includes cases where a waiver is not necessary.)					
Section B - Verified Servic	e History Doc	umented in O	fficial Records	s				
Federal agency or military service branch			Name of retirement system* (e.g., CSRS, CSRS Offset, etc.)	Remarks and non-creditable time (Indicate if service is part-time. If service was WAE or intermittent, show the number of days or hours worked.)				
	From (mm/dd/yyyy)	To (mm/dd/yyyy)	CSRS Offset, etc.)					

<sup>\*</sup>Give details of creditable civilian service not subject to retirement deductions in Section C.

# Section C - Details of Civilian Service Not Subject to Contributory Retirement System for Civilian Federal Employees

### This information is required to compute the portion of annuity based on such service.

Detail below (1) any period of Federal civilian service subject to "FICA" deductions and (2) any other Federal civilian service not subject to a Federal employee (or DC Government) retirement system. If total basic salary earned for any such period of service is known, you may make a summary entry on the right hand side below. Otherwise, show each change affecting basic salary during the period of service. Show part-time tour of duty, if applicable. If part-time service is after April 6, 1986, also provide total number of hours employee worked during the period and show what a full-time tour of duty would be.

	Effective date (mm/dd/yyyy)	Basic salary rate	Salary basis (per annum, per hour, WAE, etc.)	Leave without pay	If basic salary actually earned is available, make summary entry below:		
					From (mm/dd/yyyy)	To (mm/dd/yyyy)	Total earned
Section D - Age	ency Certification	ı					
	nation on this form accu retiring, the employee h				ficial personnel and	d/or payroll records	in the custody of
Signature of Authorized Agency Human Resources Official			Agency name and address, including ZIP Code, area code and telephone number, FAX number, and email address				
Official Title		Date (mm/dd/yyyy	v)				
Section E - Em	ployee's Certifica	tion		1			
The service listed	is complete.						
including agency,	service. (If you claim add bureau, and division. Cl Statement of Prior Feden	aimed service ca	nnot be credited	for retirement unti	il it has been verified		
your agen made a de	ve performed Federal civ cy has correctly complet eposit, be sure to read Schis affects your annuity.	ed Section C abo hedule A on page	ove. If you have a e 4 of the "Instruc	active military servetions" for Comple	vice on or after Janu	ary 1, 1957, for whi	ch you have not
Signature			- •	-		Date (mm/dd/yyyy)	