

Conditions of Seasonal Employment

Name: _____
(Please print)

Type of Appointment: _____ Career/Career-Conditional

Conditions of Employment

Due to the seasonal nature of this position, you will be subject to periodic release and recall as a condition of employment. It is anticipated that the length of the season for this position will last from approximately _____ to _____ each year.

I accept this appointment with a full-time seasonal work schedule with the following conditions:

--I will be placed in a pay status with a full-time seasonal work schedule from approximately _____ to _____.

--I will be placed in a **non-pay status** from approximately _____ to _____ unless other work exists that can be assigned to me during this period. I understand that if I am placed in a non-pay status that I may accept other employment.

--When multiple individuals are assigned to the same position description and are also on full-time seasonal work schedules, release and recall will be based on seniority using the service computation date that reflects total military and Federal service.

Benefits

When the field season has ended you will be required to complete the reverse side of the Form 9-1178, "A Request for Leave Without Pay in Excess of 30 Calendar Days." On the reverse side of Form 9-1178, you will find "Federal Employee Health Benefits (FEHB) Options While in Non-pay Status." You may elect to cancel or retain your health insurance coverage. If you elect to retain coverage, you will continue to pay the employee share of the premium and must select one of the payment options listed. Once you've recorded your decision on the aforementioned form, it must be submitted to your servicing Human Resources Office for processing.

Unemployment Compensation

When in a non-pay status Federal workers may be entitled to unemployment compensation benefits. Because eligibility varies depending on the State, you are encouraged to contact your state agency for the rules and eligibility requirements that apply to you. The Human Resources Office will issue a SF-8, "Notice to Federal Employee about Unemployment Insurance" to you that the State agency may request if you are eligible and choose to file a claim.

Signature

Date