MEMORANDUM

Date: November 10, 2015

To: All Bureau of Indian Affairs Employees

From: Deputy Director, Office of Human Capital Management - Operations

Subject: Scheduling of “Use or Lose” Annual Leave to Avoid Forfeiture

This is a reminder that the current leave year ends on January 9, 2016. All employees must schedule their “use or lose” annual leave no later than the end of Pay Period 15-25, November 28, 2015.

The maximum amount of annual leave that may be carried over to a new leave year is limited to 240 hours for full-time employees and 720 hours for members of the Senior Executive Service. Please ensure that all employees review their annual leave balances and schedule their leave in order to avoid forfeiture.

Employees with restored leave from a previous year are reminded that there is a two-year limitation on use of restored leave. Therefore, if your two-year limitation expires at the end of this leave year, you should first use your restored leave to prevent forfeiture of this leave.

The scheduling of annual leave is a statutory requirement that cannot be waived. Employees must schedule the “use or lose” annual leave on OPM Form 71, Request for Leave or Approved Absence (attached) and have it approved by their supervisor on or before November 28, 2015. It is critical you make every effort to schedule your “use or lose” annual leave. Failure to schedule annual leave or poor planning does not constitute an exigency of business.

If an employee is projected to have “use or lose” or “restored” annual leave that otherwise would be subject to forfeiture at the end of the leave year, he or she may donate this annual leave to a leave recipient under the Voluntary Leave Transfer Program. The donor may not donate more than the number of hours remaining in the leave year (as of the date of transfer) for which the leave donor is scheduled to work and receive pay. The attached OPM Form 630-A must be completed for leave donations within the Department of Interior.

If you have any questions regarding the scheduling of “use or lose”, please contact your Servicing Human Resources Office.
Request to Donate Annual Leave to Leave Recipient
Under the Voluntary Leave Transfer Program

I request that annual leave be transferred to the leave account of an approved leave recipient. This recipient is not my immediate supervisor. As of the date indicated below, I have enough annual leave in my account to cover this amount. I understand that if I am projected to forfeit annual leave during this leave year, the amount of leave I am transferring may not exceed the number of hours remaining in the leave year for which I am scheduled to work. The amount of annual leave I am transferring also is not more than half the hours I will earn this year.

I understand that my decision to transfer leave is not revocable. If a sufficient balance of unused leave remains after the recipient's medical emergency has terminated, I can elect to have a pro-rated share returned to me during either the current leave year or the following leave year, or I can elect to donate my pro-rated share to another leave recipient. However, to do so, I must remain employed by a Federal agency and be subject to chapter 63 of title 5, United States Code.

I have not been directly or indirectly intimidated, threatened or coerced, or promised any benefit by any employee for the purpose of donating or using leave.

**To Be Completed By Leave Donor**

<table>
<thead>
<tr>
<th>1. Name (Last, first, middle)</th>
<th>2. Social Security Number</th>
<th>3. Employee Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a. Position title</td>
<td>4b. Pay plan</td>
<td>4c. Grade/pay level</td>
</tr>
<tr>
<td>5a. Name of organization (Agency, Department, Office, Division, Branch, etc.)</td>
<td>5b. Office telephone number</td>
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<tr>
<td>6. Amount of annual leave accrued as of end of last pay period</td>
<td>7. Amount of leave projected to forfeit this leave year as of end of last pay period</td>
<td>8. Amount of annual leave to be transferred</td>
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<tr>
<td>9. Individual's name or identification number to whom leave is being donated</td>
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</tr>
<tr>
<td>10a. Signature</td>
<td>10b. Date signed</td>
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</tbody>
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**Privacy Act Statement**

Participation in this program is voluntary; however, solicitation of this information is authorized under 5 U.S.C 6332. The information furnished will be used to identify records properly associated with the transfer of annual leave. It may also be disclosed to a national, State, or local law enforcement agency where there is an indication of a violation or potential violation of civil or criminal law, rule, or regulation; or to another agency or court when the Government is party to a suit. Public Law 104-134 (April 26, 1996) requires that any person doing business with the Federal Government furnish a social security number or tax identification number. This is an amendment to title 31, Section 7701. Furnishing the social security number, as well as other data, is voluntary, but failure to do so may delay or prevent action on the application. If your agency uses the information furnished on this form for purposes other than those indicated above, it may provide you with an additional statement reflecting those purposes.