

**Regulation**

**NE TPR**

**Hawaii  
National Guard  
  
Technician  
Awards Program**

**Prepared By:  
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1. **Purpose.** The purpose of this memorandum is to establish policy and procedures for submission and approval of Federal Dual and Non-Dual status technician awards in the Hawaii National Guard.

## 2. References.

- a. The DOD 1400.25-M Awards, November, 2013.
- b. The TPR 451 Awards, 15 December 1998.
- c. Hawaii Supplement to TPR 430 Performance Management, 2 Aug 2012.

## 3. Program Intent.

**The Incentive Awards Program** is designed to motivate technicians to increase productivity, efficiency and economy to drive overall improvement in operations. Awards may not be used to recognize work done in a military status or to provide additional compensation for its own sake. The Incentive Awards Program is to be vigorously supported by all levels of management, and will be administered entirely on the basis of merit without regard to age, sex, race, color, religion, national origin, marital status, or physical or mental handicap.

Awards, other than honorary, will not be processed for technicians whose retirement has been finalized.

## 4. Roles and responsibilities.

Roles and responsibilities are established in accordance with TPR 451, paragraph 1-2. In addition, the following guidance is provided:

Awards Program Manager. The Incentive Awards Program is administered within the Human Resources Office (HRO) by the Awards Program Manager (the Employee Relations Specialist or designee). The Program Manager ensures award nominations comply with the procedural and administrative requirements of the awards program, acts as advisor to Awards Committees on substantive matters, processes award determinations in the personnel system, and notifies nominating officials of award determinations.

Award Program Committees. Award determinations are made by committees established at Headquarters for the Army National Guard and at each Air Wing for the Wing and its respective GSUs. Example appointment letters may be found in Enclosures 2 and 3.

- a. Awards committees will be comprised of a Chair, an Alternate Chair, the Program Manager and/or Air HRO Remote Designee, a representative of the applicable Comptroller, and other members as deemed necessary or desirable locally. The board will fairly represent all areas with technician employees, and include individuals with the rank and experience to enhance the credibility of the board's decisions. Example Standard Operating procedures may be found in Enclosure 1.

b. The Committee's responsibilities include the following:

(1) Establishing an awards program plan that identifies command intent, any awards initiatives, communication to the workforce, method of public recognition for those receiving awards, criteria for substantive review of submissions, meeting schedule, budget, and provides for the review and oversight of program results to assure that all awards are granted equitably and on the basis of merit.

(2) Performing substantive *review* of awards submissions following the administrative review by the Program Manager. As a result of substantive review, the committee may return the submission to the supervisory chain with the option to resubmit, or adjust the type or amount of award requested (e.g., awarding a QSJ where an SSP was nominated, or changing the amount of a cash or time off award).

(3) Ensuring that all award determinations and presentations are conducted in a timely manner. This includes the establishment of local time limits for submission of awards if desired.

(4) Promoting and publicizing the program to create and maintain interest in the Incentive Awards Program.

Supervisors. Supervisors are charged to participate in and support the program. Supervisors must determine what types of awards will best motivate a technician to greater productivity, match recognition with performance, and ensure awards are submitted in a timely fashion.

Supervisors will not inform technicians that an award nomination has been submitted until notified by the program manager of the Awards Committee determination.

## 5. Basis of Awards.

The Hawaii National Guard may approve technician awards as an individual or member of a group, on the basis of a.

A suggestion, invention, superior accomplishment, productivity gain, or other personal effort that contributes to the efficiency, economy, or other improvement of Government operations or achieves a significant reduction in paperwork;

b. A special act or service in the public interest in connection with or related to official employment; or

c. Performance as reflected in the employee's most recent rating of record, provided that the rating of record is at the fully successful level (or equivalent) or above. There is no entitlement to performance based awards. Given an appropriate rating, an employee must be nominated by supervision in order to be considered for any performance based award.

A technician may not receive multiple awards for the same act or period of performance.

## 6. Types of Awards.

A technician may receive the following types of awards: Honorary, Suggestion/Invention, Time-Off, Cash (AKA On the Spot Award or Special Act/Service Award), Sustained Superior Performance, or Quality Step Increase. The requirements for these awards are described individually in the following paragraphs.

#### 7. Honorary Awards.

Honorary awards do not involve cash payment or time-off. The award is of an honorific value, such as a letter, certificate, medal, plaque, or item of nominal value. Honorary awards may be granted as determined by the local awards board without further coordination at state level.

Contact the state ethics advisor if you are concerned about the appropriateness of a particular honorary award.

#### 8. Suggestion/Invention Awards.

The Suggestion/Invention program rewards technicians for their ideas to improve economy, efficiency, or effectiveness of Federal government operations.

Army technicians may submit their ideas online through AKO to the Army Suggestion Program (ASP). For more information on the Army program, contact HRO.

Air technicians may submit their ideas through the HRO Awards Program Manager to the USAF Idea Program on AF IMT1000. For more information on the Air program .contact HRO.

#### **9. Time-Off Awards (TOAs)**

Time-Off awards allow additional time off from duty as an incentive award without loss of pay or charge to leave. They can be used as a form of recognition for annual performance, a specific superior accomplishment, or other personal effort that contributes to quality efficiency or economy of government operations. The award must be based solely on efforts in a technician status. Temporary technicians are eligible to receive time off awards, if the temporary appointment exceeds 180 calendar days in a consecutive 12-month period.

The maximum amount that may be awarded, for any single act or performance rating, is 40 hours. The total amount of time a technician may be awarded during any one leave year is 80 hours. Time-Off awards of 40 hours or more, in any given year, will disqualify a technician for an SSP or QSI in that rating period. It is recommended that time-off awards be given in full workday increments.

To submit nominations for time-off awards, the first line supervisor will prepare NGB Form 32 in original and one copy. The number of hours requested and dollar value of the time off award must be annotated on the NGB Form 32. An example of a completed TOA NGB Form 32 is included at Appendix I, Examples 1 and 6.

If the award is for a performance year, identify the amount of the desired award using Table 1, and attach the rating portion of the NGB Form 430, printed from the PAA.

If the award is for a specific act or contribution, include or attach a short narrative describing the value (moderate, substantial or exceptional) and scope (local, broad or general) of the act. Use Table 2 to identify the appropriate level of award, and provide specifics in the nomination. It may be that the technician has given a high quality contribution involving a difficult or important project or assignment, displayed special initiative and skill in completing an assignment or project before the deadline, or in making improvements in a product, activity, program, or service, or ensure the mission of the organization is accomplished during a difficult period by successfully completing additional work or a project assignment while maintaining the employee's own work load.

Time-off awards, for up to 2 workdays (based on the schedule worked by the technician), may be approved by two levels of supervision. Submission must be made on an NGB Form 32 to the Awards Program Manager. Time-off awards, for more than 2 workdays, must be submitted to the Awards Committee. A time off award must be scheduled and used within one (1) year from approval date. There are no provisions to reinstate time off awards. Scheduling is subject to supervisor's approval. A time-off award does not convert to cash under any circumstances.

## **10. Cash Awards for Specific Acts or Contributions**

Cash Awards up to \$10,000.00, may be authorized by The Adjutant General (TAG), for technicians who generate tangible or intangible benefits to the government (see Tables 3 and 5). Awards greater than \$10,000, must be forwarded through NGB to DoD Component Heads (Secretary of the Army and Secretary of the Air Force) for approval. All permanent/temporary/indefinite technicians are eligible for cash awards.

Table 5 provides a sliding scale of criteria for award amount determinations. Smaller cash awards for acts with limited significance may be authorized for producing high quality work under tight deadlines; performing emergency assignments in addition to regular duties; demonstrating exceptional courtesy, responsiveness, or initiative in dealing with clients or colleagues; or exercising extraordinary initiative or creativity in addressing a critical need or difficult problem.

Larger cash awards, for acts with greater significance, are approved in recognition of an act of heroism, or similar one-time special act, service or scientific achievement that contributes to the efficiency, economy or other improvement of government operations or promotes the public interest. The accomplishment may have occurred within or outside assigned job responsibilities, and may involve more than one technician. Most often, the larger cash award have been determined to be appropriate for key staff members of Air Wings, units or the Joint Force Headquarters who contribute significantly to maintaining mission effectiveness capability in periods of extraordinary OPTEMPO or other exigencies. This award is particularly appropriate for recognizing accomplishments during short-term assignments or to recognize performance that has exceeded job requirements as a one-time occurrence, (e.g., overcoming unusual difficulties on a particular project or assignment or exemplary or courageous handling of an emergency situation related to official employment).

Submit for this award using NGB Form 32. Include a memorandum describing the one-time act or service the award is based upon and whether the benefit is tangible or intangible. Awards based on tangible benefits must include documentation demonstrating how the benefit was calculated. Awards based on intangible benefits must include documentation describing the value of the benefit and the extent of its application.

The memorandum must be addressed through channels to the approving official (Awards Committee, ATAG Air, ATAG Army, or TAG, as appropriate).

**The ARNG Review and Approval Process:** The NGB Form 32 and attachments must be forwarded to the HRO Technician Benefits section (NGOH-HRO-TB). The award will be submitted to the ARNG Incentive Awards Program Committee for review. For awards between \$3000 and \$4,999, final approval authority will reside with the A TAG-Army. For awards from \$5000 up to \$10,000, final approval authority will reside with The Adjutant General.

**The ANG Review and Approval Process:** The NGB Form 32 and attachments must be forwarded to the Wing HRO Remote. The award will be submitted to the Wing Incentive Awards Program Committee for review, and then to the HRO Technician Benefits section (NGOH-HRO-TB). For awards between \$3000 and \$4,999, final approval authority will reside with the A TAG-Air. For awards from \$5000 up to \$10,000, final approval authority will reside with The Adjutant General.

## **11. Cash Awards for Annual Performance.**

The common term for a cash award, based on an annual performance rating, is an award for Sustained Superior Performance (SSP). A technician is eligible for an SSP, if his or her most recent annual appraisal is at an overall summary rating of Fully Successful (3) or higher, and covers 52 weeks of continuous performance in the same position and grade. There is no automatic entitlement to an SSP due to a rated level of performance. An appropriate supervisor must nominate the technician, in order to be considered for an SSP.

A technician **is not** eligible to receive a SSP if he or she has received a Sustained Superior Performance (SSP), Quality Step Increase (QSI), or Time-Off Award(s) totaling 40 hours or more for accomplishments during the performance period.

Periods of excused absence in excess of thirty days due to uniformed service, illness of self or family member under FMLA, or Worker's Compensation claims, cannot be counted as part of the time supporting the award. In these situations, the 52 weeks of consecutive service must be computed based upon the 52 weeks of work before and/or after the absence. Supervision is responsible to identify the time frame the award is based on, and to ensure performance is properly documented.

Position changes occurring after the nominated period of performance do not affect eligibility. Supervisors may submit SSP nominations if a technician is about to receive or has recently received a promotion, but Award Committees must consider whether the promotion constitutes adequate recognition for performance, and whether another award is more appropriate.

The amount of the SSP award is based on available funding and expressed as a percentage of base pay. Base pay does not include special pays (shift differential) or retained rates. Supervisors are responsible to identify an appropriate percentage up to a maximum of 10%. Ranges for SSP awards are described in Table 2. Awards from \$3000- 4,999 will go to the service ATAG for final approval. Awards from \$5000 to 10,000 will go to TAG for final approval.

Nominations for performance based awards may be submitted at any time, provided the rating of record documenting the performance is; a) the most recent rating, and b) still current (i.e., technicians will be ineligible for performance based awards if their appraisal is

overdue). Awards-only appraisals are not accepted. The SSP nominations are submitted on the NGB Form 32. Attach a copy of the NGB Form 430 showing the rating of record as completed in PAA.

**The ARNG Review and Approval Process.** The NGB Form 32 and attachments must be approved by two levels of supervision and the MSC AD/Director and forwarded to the HRO Technician Benefits section (NGOH-HRO-TB). The HRO will submit the award nomination to the ARNG Incentive Awards Program Committee. The HRO will complete any administrative requirements of processing awards. An example is included in Appendix 1, Examples 2 and 6.

**The ANG Review and Approval Process.** The NGB Form 32 and attachments must be approved by two levels of supervision and forwarded to the Wing HRO Remote. If approved by the Wing Incentive Awards Program Committee, final approval will be requested of the Wing/GSU Commander. The Wing HRO Remote will complete any administrative requirements of processing awards. An example is included in Appendix 1, Examples 2 and 6.

## **12. Quality Step Increase (QSI).**

A QSI is a faster than normal within-grade increase. It is used to reward technicians at all General Schedule grade levels who display outstanding performance on a continuing basis, as reflected in a technician's most recent rating of record.

A technician is eligible for a QSI if, his or her most recent annual appraisal is at an overall summary rating of Outstanding (5), and covers 52 weeks of continuous performance in the same position and grade. There is no automatic entitlement to a QSI due to a rated level of performance: an appropriate supervisor must nominate the technician in order to be considered for a QSI.

All QSI's have an impact on scheduled GS Within-Grade-Increase (WGI) calculations. After a QSI, the wait period to the next step is calculated from the last scheduled step increase effective date. It is not calculated from the QSI effective date. The employee receives the full benefit of receiving a WGI at an earlier date and has not lost any time creditable towards his or her next WGI.

Periods of excused absence in excess of thirty days due to uniformed service, illness of self or family member under FMLA, or Worker's Compensation claims, cannot be counted as part of the time supporting the award. In these situations, the 52 weeks of consecutive service must be computed based upon the 52 weeks of work before and/or after the absence. Supervision is responsible to identify the time frame the award is based on and to ensure performance is properly documented. -

A reassignment occurring after the nominated period of performance does not affect eligibility. However, a technician **may not** receive a QSI if he or she has been promoted during the performance period or since the end of the performance period. In these situations, the Program Manager will return the nomination to the appropriate supervisor for consideration of another award type. For these reasons, supervisors should submit QSI nominations as soon as possible after the end of the rating period.

A technician **is not** eligible to receive a QSI if he/she has received a Sustained Superior Performance (SSP), a QSI, or Time-Off Award(s) totaling 40 hours or more for accomplishments during the performance period.

Nominations for performance based awards may be submitted, at any time, during the year time provided the most recent rating of record supports the award requested. The QSI nominations are submitted on the NGB Form 32. Attach a copy of the rating of record that supports the award. The NGB Form 32 must be annotated as follows:

***"I certify that, based on past experience, it is believed that this technician's high quality of performance is likely to continue."***

*/s/*  
***Immediate Supervisor***

**The ARNG Review and Approval Process:** The NGB Form 32 and attachments must be approved by two levels of supervision and the MSC AD/Director and forwarded to the HRO Technician Benefits section (NGOH-HRO-TB). The HRO will submit the award nomination to the ARNG Incentive Awards Program Committee. The HRO will complete any administrative requirements of processing awards. An example is included in Appendix I, Example 5 and 6.

**The ANG Review and Approval Process:** The NGB Form 32 and attachments must be approved by two levels of supervision and forwarded to the Wing HRO Remote. If approved by the Wing Incentive Awards Program Committee, final approval will be requested of the Wing/GSU Commander. The Wing HRO Remote will complete any administrative requirements of processing awards. An example is included in Appendix I, Example 5 and 6.

FOR THE ADJUTANT GENERAL:

Director of Human Resources

DISTRIBUTION: "Special"  
(1 ea. Tech Supv)  
(1 ea. Mil Dept. Activity/Organization)

## Enclosure 1: Sample Awards Committee Standard Operating Procedure

1. The \_\_\_\_ Award Program Committee will operate IAW OH Supp to TPR 451.
2. Awards committee meetings will take place at the end of the first and second quarters of the FY, and as often as the Chair requires.
3. At the conclusion of the first meeting of the FY, the Committee will *have* established:
  - a. The awards budget,
  - b. Any awards initiatives based on received command intent,
  - c. Communication methods to publicize the program the workforce, and
  - d. The method of public recognition for those receiving awards.
4. At the conclusion of the second meeting, the Committee will have completed a substantive review of all awards submissions to ensure that awards meet with the required standard.
  - a. Approved awards will be granted or forwarded to higher levels if additional approval is required,
  - b. Disapproved awards will be returned to supervision with the option to resubmit with additional information or reconsidered as a different type of award.
5. Additional meetings may be required to review later submissions or resubmitted awards nominations.

Enclosure 2: Example Air Awards Committee Appointment Letter

The following individuals are appointed to the \_\_\_\_Wing & GSU Awards Committee for  
FY \_\_\_\_\_

Chair:

Alternate:

Comptroller rep:

MSG Rep:

MXS Rep:

OPS Rep:

GSU Rep:

The Air HRO Remote will coordinate with HRO for all Awards Program Manager  
functions IAW Hawaii Supp to TPR 451.

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Wing CC	Date
---------	------

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GSU CC	Date
--------	------

CC: HRO-T

Enclosure 3: Example Army Awards Committee Appointment Letter

The following individuals are appointed to the Army Awards Committee for FY \_\_\_\_\_

Chair:

Alternate:

USPFO rep:

SMO Rep:

SAO Rep:

G-Staff Rep:

MSC Rep:

The HRO Awards Program Manager will support the Committee JAW Hawaii Supp to TPR 451.

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CoS	Date
-----	------

CC: HRO-T

**Appendix of Tables**

**Table 1. Scale of Time Off Awards Based on Performance Rating**

There is no entitlement to an award based on a performance rating. Awards must be recommended by the supervisor.

**Up to \$2,999 Awards committee**

**\$3,000-4,999 final approval with Service ATAG**

**\$5,000-10,000 final approval with TAG**

Rating Hours	Hours
3 Fully Successful	Up to 2 workdays
4 Excellent	Up to 3 workdays
5 Outstanding	Up to 5 workdays NTE 40 Hours

**Table 2. Scale for Sustained Superior Performance (SSP) Award**



There is no entitlement to an award based on a performance rating. Awards must be recommended by the supervisor

Annual Rating of Record	Fully Successful	Excellent	Outstanding
Percentage of Base Pay	Up to 3%	Up to 7%	Up to 10%

<p align="center"><b>Table 3. Scale of Cash Awards for Specific Acts with Tangible Benefits</b>            There is no entitlement to an award based on a performance rating. Awards must be recommended by the supervisor.</p>	
<b>Estimated First Year Benefits</b>	<b>Amount of Award to Employee</b>
Up to \$100,000:	10% of benefits -Awards from \$3000-4999 require ATAG approval. -All awards at or above \$5000 require TAG approval.
\$100,000 or greater	\$10,000 plus 1% of benefits above \$100,000, up to \$25,000 with the approval of NGB-TN and OPM

<p align="center"><b>Table 4. Scale of Time Off Awards for Specific Acts</b></p> <p align="center">There is no entitlement to an award based on a performance rating. Awards must be recommended by the supervisor.</p>			
Scope →  Impact ↓	<p align="center">Local</p> <p>Affects functions, mission or personnel of one work center</p>	<p>Affects functions, mission, or personnel of multiple work centers within a Wing/GSU MSC/Directorate.</p>	<p>Affects functions, mission, or personnel of the entire Wing/GSU MSC/Directorate or higher headquarters.</p>
<p>Moderate:</p> <p>Change or modification of an operating principle or procedure with limited use or impact</p>	<p align="center">Full day</p> <p align="center">Approval: Supervisory</p>	<p align="center">Up to 2 days</p> <p align="center">Approval: Supervisory</p>	<p align="center">Up to 3 days</p> <p align="center">Approval: Awards Committee</p>
<p>Substantial:</p> <p>Substantial change or modification of procedures.</p>	<p>Up to 2 days Approval:</p> <p>Approval: Supervisory</p>	<p>Up to 3 days Approval:</p> <p>Approval: Awards Committee</p>	<p>Up to 4 days Approval:</p> <p>Approval: Awards Committee</p>
<p>Exceptional:</p> <p>Initiation of a new principle or major procedure.</p>	<p>Up to 3 days</p> <p>Approval: Awards Committee</p>	<p>Up to 4 days</p> <p>Approval: Awards Committee</p>	<p>Up to 5 workdays (40 hours maximum)</p> <p>Approval: Awards Committee</p>

**Table 5. Scale of Cash Awards for Specific Acts with Intangible Benefits**  
 There is no entitlement to an award based on a performance rating. Awards must be recommended by the supervisor

Scope Impact  	Local  Affects functions, mission or personnel of one or more workcenters in a facility or instillation.	Extended  Affects functions, missions or personnel of an entire Wing/GSU or MSC/Directorate	Broad  Affects functions, mission, or personnel of all OHARNG or all OHANG service components.	General  Affects functions, mission, or personnel of the entire Ohio National Guard or above.
Moderate;  Change or modification of an operating principle or procedure with limited use or impact.	\$25-125  Type: OTS Approval: Awards Committee	\$126-325  Type: OTS Approval: Awards Committee	\$326-650  Type: OTS Approval: Awards Committee	\$651- 1300  Type: SASA Approval: Awards Committee
Substantial:  Substantial change or modification of procedures. An important improvement to the value of a product, activity, program, or service to the public	\$125-325  Type: OTS Approval: Awards Committee	\$326-650  Type: OTS Approval: Awards Committee	\$651-1300  Type: SASA Approval: Awards Committee	\$1301-3150  Type: SASA Approval: Awards Committee \$3000: ATAG
High:  Complete revision of a basic principle or procedure; a highly significant improvement to the value of a product or service.	\$326-650  Type: OTS Approval: Awards Committee	\$651-1300  Type: SASA Approval: Awards Committee	\$1301-3150  Type: SASA Approval: Awards Committee \$3000: ATAG	\$3151-6300  Type: SASA Approval: ATAG up to \$4,999; TAG for \$5,000+
Exceptional:  Initiation of a new principle or major procedure; a superior improvement to the quality of a critical product, activity, program, or service to the public.	\$650-1300  Type: SASA Approval: Awards Committee	\$1301-3150  Type: SASA Approval: Awards Committee \$3000: ATAG	\$3151-6300  Type: SASA Approval: ATAG up to \$4,999; TAG for \$5,000+	\$6301-10,000  Type: SASA Approval: TAG

**Appendix A**  
**Awards Review Checklist**

**Performance-Based Cash Awards & QSIs**

- \_\_\_\_\_ 1. NGB Form 32 completed and signed (Items 1-10)
- \_\_\_\_\_ 2. NGB Form 430 and 430-1 (Technician Performance Standards and Appraisal Form)
- \_\_\_\_\_ 3. Certification of performance statement if latest appraisal is over 60 days old
- \_\_\_\_\_ 4. Performance is at the excellent or outstanding level (Outstanding for QSIs only).
- \_\_\_\_\_ 5. Narrative Justification
- \_\_\_\_\_ 6. A minimum 12 month qualifying period of service is entered in block 2, NGB Form 32, and does not overlap a period of service that served as the basis for a previous cash award.
- \_\_\_\_\_ 7. Total period of qualifying service (Block 2, NGB Form 32) was in the same job and same grade level, or detailed to the same or higher grade duties .
- \_\_\_\_\_ 8. No absence in excess of 30 days during rating period
- \_\_\_\_\_ 9. Supporting Documentation

**Special Act/Service Cash Awards & On-the-Spot Cash Awards**

- \_\_\_\_\_ 1. NGB Form 32 completed and signed (Items 1-10)
- \_\_\_\_\_ 2. Narrative Justification
- \_\_\_\_\_ 3. Has not received a Special Act/Service or On-the Spot Cash Award in the last 52 weeks
- \_\_\_\_\_ 4. Supporting Documentation

**Suggestion Awards**

- \_\_\_\_\_ 1. AF Form 1000 (Air) or NGB Form 6 (Army)
- \_\_\_\_\_ 2. Supporting Documentation

**Time-Off Awards**

- \_\_\_\_\_ 1. NGB Form 32
- \_\_\_\_\_ 2. Narrative Justification

**RECOMMENDATION FOR INCENTIVE AWARD OR QUALITY SALARY INCREASE**

The proponent agency is NGB-HR. The prescribing directive is TPR 451.

**SECTION I - TO BE COMPLETED BY OPERATING OFFICE**

1. EMPLOYEE NAME: (Last, First, Mi)		DATE:
2. EMPLOYEE ADDRESS:		
3. PRESENT POSITION TITLE:	GRADE & STEP: 07-02	SALARY: \$41,548
4. TYPE OF RECOGNITION RECOMMENDED: Time-Off Award (40 hours, \$770)		Enter this nukmber of hours and the amount of pay the employee will recieve for those hours
5. BASIS FOR RECOMMENDATION: (See reverse side for 'Evidence of Superior or Outstanding Achievement')		Enter the date or time-frame of the act or service OR if for performance, select the "Superior Performance" box and enter line appraisal dates
<input type="checkbox"/> SUPERIOR PERFORMANCE	PERIOD:	
<input type="checkbox"/> SPECIAL ACT OR SERVICE	DATE OF ACT OR DATE CONTRIBUTION PUT INTO USE:	
6. POSITION TITLE, GRADE & SALARY DURING PERIOD OF RECOMMENDATION: (If different than Item 3.)		
7. COMMAND, INSTALLATION AND LOCATION:	8. ORGANIZATION:	
9. TITLE & SIGNATURE OF IMMEDIATE SUPERVISOR:		Printed Names, Titles and Signatures
10. TITLE & SIGNATURE OF APPROVING OPERATING OFFICIAL:		

**SECTION II - TO BE COMPLETED BY TECHNICIAN PERSONNEL OFFICE**

11. TYPE AND DATE OF INCENTIVE AWARD(S) OR DATE OF QUALITY INCREASE(S) PREVIOUSLY GRANTED: (Except Length of Service)
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**SECTION III - TO BE COMPLETED BY LOCAL AWARDS COMMITTEE**

12. RECOMMEND APPROVAL OF FOLLOWING AWARDS:			
<input type="checkbox"/> CASH	TOTAL AMOUNT:	INITIAL AMOUNT:	ADDITIONAL AMOUNT:
<input type="checkbox"/> INTANGIBLE BENEFITS			
<input type="checkbox"/> TANGIBLE SAVINGS	ESTIMATED FIRST YEAR SAVINGS:		
<input type="checkbox"/> OTHER:			
<input type="checkbox"/> DISAPPROVED <sup>1</sup>	TITLE:	SIGNATURE & DATE:	

**SECTION IV - TO BE COMPLETED BY APPROPRIATE APPROVING AUTHORITY**

APPROVING AUTHORITY AND ACTION	ADDITIONAL CASH AWARD	RECOMMEND	SIGNATURE & TITLE	DATE
LOCAL COMMANDER: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND	ROBERT W. LESHER, HIARNG CHIEF OF STAFF	Date
STATE AWARDS COMMITTEE: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		
ADJUTANT GENERAL: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		
NGB INCENTIVE AWARDS BOARD: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		

**NOTICE TO EMPLOYEE:** UPON ACCEPTANCE OF CASH AWARDS, THE USE OF THIS CONTRIBUTION BY THE UNITED STATES SHALL NOT FORM THE BASIS OF A FURTHER CLAIM OF ANY NATURE UPON THE UNITED STATES BY YOU, YOUR HEIRS, OR ASSIGNS.

**RECOMMENDATION FOR INCENTIVE AWARD OR QUALITY SALARY INCREASE**

The proponent agency is NGB-HR. The prescribing directive is TPR 451.

**SECTION I - TO BE COMPLETED BY OPERATING OFFICE**

1. EMPLOYEE NAME: (Last, First, Mi)		DATE:
2. EMPLOYEE ADDRESS:		
3. PRESENT POSITION TITLE:	GRADE & STEP: 07-01	SALARY: \$40,208
4. TYPE OF RECOGNITION RECOMMENDED: Sustained Superior Performance (\$1,200)		← Enter the amount of the SSP
5. BASIS FOR RECOMMENDATION: (See reverse side for 'Evidence of Superior or Outstanding Achievement')		The appraisal dates go here. The performance period MUST cover a minimum of 52 weeks
<input type="checkbox"/> SUPERIOR PERFORMANCE	PERIOD: 1 October 2016 - 30 September 2016	←
<input type="checkbox"/> SPECIAL ACT OR SERVICE	DATE OF ACT OR DATE CONTRIBUTION PUT INTO USE:	
6. POSITION TITLE, GRADE & SALARY DURING PERIOD OF RECOMMENDATION: (If different than Item 3.)		
7. COMMAND, INSTALLATION AND LOCATION:		8. ORGANIZATION:
9. TITLE & SIGNATURE OF IMMEDIATE SUPERVISOR:		↙ Printed Names, Titles and Signatures
10. TITLE & SIGNATURE OF APPROVING OPERATING OFFICIAL:		

**SECTION II - TO BE COMPLETED BY TECHNICIAN PERSONNEL OFFICE**

11. TYPE AND DATE OF INCENTIVE AWARD(S) OR DATE OF QUALITY INCREASE(S) PREVIOUSLY GRANTED: (Except Length of Service)
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**SECTION III - TO BE COMPLETED BY LOCAL AWARDS COMMITTEE**

12. RECOMMEND APPROVAL OF FOLLOWING AWARDS:			
<input type="checkbox"/> CASH	TOTAL AMOUNT:	INITIAL AMOUNT:	ADDITIONAL AMOUNT:
<input type="checkbox"/> INTANGIBLE BENEFITS			
<input type="checkbox"/> TANGIBLE SAVINGS	ESTIMATED FIRST YEAR SAVINGS:		
<input type="checkbox"/> OTHER:			
<input type="checkbox"/> DISAPPROVED <sup>1</sup>	TITLE:	SIGNATURE & DATE:	

**SECTION IV - TO BE COMPLETED BY APPROPRIATE APPROVING AUTHORITY**

APPROVING AUTHORITY AND ACTION	ADDITIONAL CASH AWARD	RECOMMEND	SIGNATURE & TITLE	DATE
LOCAL COMMANDER: <input checked="" type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND	ROBERT W. LESHER, HIARNG CHIEF OF STAFF	Date
STATE AWARDS COMMITTEE: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		
ADJUTANT GENERAL: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		
NGB INCENTIVE AWARDS BOARD: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		

**NOTICE TO EMPLOYEE:** UPON ACCEPTANCE OF CASH AWARDS, THE USE OF THIS CONTRIBUTION BY THE UNITED STATES SHALL NOT FORM THE BASIS OF A FURTHER CLAIM OF ANY NATURE UPON THE UNITED STATES BY YOU, YOUR HEIRS, OR ASSIGNS.

**RECOMMENDATION FOR INCENTIVE AWARD OR QUALITY SALARY INCREASE**

The proponent agency is NGB-HR. The prescribing directive is TPR 451.

**SECTION I - TO BE COMPLETED BY OPERATING OFFICE**

1. EMPLOYEE NAME: (Last, First, Mi)		DATE:
2. EMPLOYEE ADDRESS:		
3. PRESENT POSITION TITLE:	GRADE & STEP: 11-04	SALARY: 465,456
4. TYPE OF RECOGNITION RECOMMENDED: <b>Special Act/Specail Service (\$6,000)</b> Enter the amount of the Award		
5. BASIS FOR RECOMMENDATION: (See reverse side for 'Evidence of Superior or Outstanding Achievement')		
<input type="checkbox"/> SUPERIOR PERFORMANCE	PERIOD:	Enter the date or time-frame of the specail act or service
<input type="checkbox"/> SPECIAL ACT OR SERVICE	DATE OF ACT OR DATE CONTRIBUTION PUT INTO USE:	
6. POSITION TITLE, GRADE & SALARY DURING PERIOD OF RECOMMENDATION: (If different than Item 3.)		
7. COMMAND, INSTALLATION AND LOCATION:	8. ORGANIZATION:	
9. TITLE & SIGNATURE OF IMMEDIATE SUPERVISOR:		Printed Names, Titles and Signatures
10. TITLE & SIGNATURE OF APPROVING OPERATING OFFICIAL:		

**SECTION II - TO BE COMPLETED BY TECHNICIAN PERSONNEL OFFICE**

11. TYPE AND DATE OF INCENTIVE AWARD(S) OR DATE OF QUALITY INCREASE(S) PREVIOUSLY GRANTED: (Except Length of Service)
---

**SECTION III - TO BE COMPLETED BY LOCAL AWARDS COMMITTEE**

12. RECOMMEND APPROVAL OF FOLLOWING AWARDS:			
<input type="checkbox"/> CASH	TOTAL AMOUNT:	INITIAL AMOUNT:	ADDITIONAL AMOUNT:
<input type="checkbox"/> INTANGIBLE BENEFITS			
<input type="checkbox"/> TANGIBLE SAVINGS	ESTIMATED FIRST YEAR SAVINGS:		
<input type="checkbox"/> OTHER:			
<input type="checkbox"/> DISAPPROVED <sup>1</sup>	TITLE:	SIGNATURE & DATE:	

**SECTION IV - TO BE COMPLETED BY APPROPRIATE APPROVING AUTHORITY**

APPROVING AUTHORITY AND ACTION	ADDITIONAL CASH AWARD	RECOMMEND	SIGNATURE & TITLE	DATE
LOCAL COMMANDER: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND	ROBERT W. LESHER, HIARNG CHIEF OF STAFF	Date
STATE AWARDS COMMITTEE: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		
ADJUTANT GENERAL: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		
NGB INCENTIVE AWARDS BOARD: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		

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**RECOMMENDATION FOR INCENTIVE AWARD OR QUALITY SALARY INCREASE**

The proponent agency is NGB-HR. The prescribing directive is TPR 451.

**SECTION I - TO BE COMPLETED BY OPERATING OFFICE**

1. EMPLOYEE NAME: (Last, First, Mi)		DATE:
2. EMPLOYEE ADDRESS:		
3. PRESENT POSITION TITLE:	GRADE & STEP: 11-04	SALARY: \$65,456
4. TYPE OF RECOGNITION RECOMMENDED: <b>On the Spot Cash Award (\$300)</b>		Enter the type and amount of the award
5. BASIS FOR RECOMMENDATION: (See reverse side for 'Evidence of Superior or Outstanding Achievement')		
<input type="checkbox"/> SUPERIOR PERFORMANCE	PERIOD:	Enter the date or time-frame of the special act or service 
<input type="checkbox"/> SPECIAL ACT OR SERVICE	DATE OF ACT OR DATE CONTRIBUTION PUT INTO USE:	
6. POSITION TITLE, GRADE & SALARY DURING PERIOD OF RECOMMENDATION: (If different than Item 3.)		
7. COMMAND, INSTALLATION AND LOCATION:		8. ORGANIZATION:
9. TITLE & SIGNATURE OF IMMEDIATE SUPERVISOR:		Printed Names, Titles and Signatures 
10. TITLE & SIGNATURE OF APPROVING OPERATING OFFICIAL:		

**SECTION II - TO BE COMPLETED BY TECHNICIAN PERSONNEL OFFICE**

11. TYPE AND DATE OF INCENTIVE AWARD(S) OR DATE OF QUALITY INCREASE(S) PREVIOUSLY GRANTED: (Except Length of Service)
---

**SECTION III - TO BE COMPLETED BY LOCAL AWARDS COMMITTEE**

12. RECOMMEND APPROVAL OF FOLLOWING AWARDS:			
<input type="checkbox"/> CASH	TOTAL AMOUNT:	INITIAL AMOUNT:	ADDITIONAL AMOUNT:
<input type="checkbox"/> INTANGIBLE BENEFITS			
<input type="checkbox"/> TANGIBLE SAVINGS	ESTIMATED FIRST YEAR SAVINGS:		
<input type="checkbox"/> OTHER:			
<input type="checkbox"/> DISAPPROVED <sup>1</sup>	TITLE:	SIGNATURE & DATE:	

**SECTION IV - TO BE COMPLETED BY APPROPRIATE APPROVING AUTHORITY**

APPROVING AUTHORITY AND ACTION	ADDITIONAL CASH AWARD	RECOMMEND	SIGNATURE & TITLE	DATE
LOCAL COMMANDER: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND	ROBERT W. LESHER, HIARNG CHIEF OF STAFF	Date
STATE AWARDS COMMITTEE: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		
ADJUTANT GENERAL: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		
NGB INCENTIVE AWARDS BOARD: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		

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**EVIDENCE OF SUPERIOR OR OUTSTANDING ACHIEVEMENT**

1. Attach statement of major duties performed and one copy of Position Description for position on which recommendation is based.
2. Attach detailed and specific statements of fact to the recommendation. This must be a factual presentation of the nature and merit of employee's actual performance and an indication of how it exceeds normal performance requirements of the employee's position. Indicate benefits resulting from the performance and the significance of special act or service rendered. Where achievement resulted in tangible benefits in operations, give detailed computation and analysis of such benefits.
3. If tangible benefits were not applicable, give the type of relative importance of intangible benefits. Explain also, significance of accomplishment to the command.
4. Attach a draft of the proposed citation, written in the third person, and not exceeding 70 words if an honorary award is recommended. Use 8 X 10 1/2 inch sheets of paper.

**REMARKS**

Instruction #1 above is not applicable - DO NOT send a copy of the position description with the award.

You MUST complete the remarks section - include reasons to why you believe the employee should receive the award (please see instruction #2 above).

**Time-Off Awards:** Include substantial remarks as to why the employee is deserving of the award. This award consists of hours of leave given to an employee for superior accomplishments, personal efforts that contribute to the quality, efficiency, or economy of governmental operations, or for performance during an appraisal period. Any nominations that exceed 2 workdays (based on the employee's work schedule) must go through the respective awards committees for approval.

**Sustained Superior Performance Awards:** A copy of the full annual appraisal must be submitted along with the NGB 32. In the remarks section of the NGB 32, include substantial remarks as to why the employee is deserving of the award. All nominations for this type of award must go through the respective awards committees for approval. This type of award is based on 52 weeks of performance.

**Special Act/Special Service and On-the-Spot Cash Awards:** Include a memorandum routed through channels to approving official (this is dependent on the amount of the award) that describes the one-time act or service that the award is based upon, and whether the benefit is tangible or intangible. If the award is based upon tangible benefits, documentation must also be included that demonstrates how the benefit was calculated. Awards based upon intangible benefits must describe the value of the benefit and the extent of its application in the memorandum.

**Quality Step Increases:** A copy of the full annual appraisal must be submitted along with the NGB 32, In the remarks section of the NGB 32, include substantial remarks as to why the employee is deserving of the award. You must also include the following sentence in the remarks: "I certify that based on past experience, it is believed that this technician's high quality of performances likely to continue." Nominations for this type of award must go through the respective awards committees for approval. Only GS employees who display outstanding performance on a continued basis are eligible for this award. This award is based on 52 weeks of performance.

**RECOMMENDATION FOR INCENTIVE AWARD OR QUALITY SALARY INCREASE**

The proponent agency is NGB-HR. The prescribing directive is TPR 451.

**SECTION I - TO BE COMPLETED BY OPERATING OFFICE**

1. EMPLOYEE NAME: (Last, First, Mi)		DATE:
2. EMPLOYEE ADDRESS:		
3. PRESENT POSITION TITLE:	GRADE & STEP:	SALARY:
4. TYPE OF RECOGNITION RECOMMENDED: <b>Quality Step Increase (\$1,341)</b>		Enter type of award and calculate yearly salary difference between steps
5. BASIS FOR RECOMMENDATION: (See reverse side for 'Evidence of Superior or Outstanding Achievement')		Appraisal date goes here. The appraisal/performance time-frame MUST cover a minimum of 52-weeks
<input type="checkbox"/> SUPERIOR PERFORMANCE	PERIOD: 1 October 2015-30 September 2016	
<input type="checkbox"/> SPECIAL ACT OR SERVICE	DATE OF ACT OR DATE CONTRIBUTION PUT INTO USE:	
6. POSITION TITLE, GRADE & SALARY DURING PERIOD OF RECOMMENDATION: (If different than Item 3.)		
7. COMMAND, INSTALLATION AND LOCATION:		8. ORGANIZATION:
9. TITLE & SIGNATURE OF IMMEDIATE SUPERVISOR:		Printed Names, Titles and Signatures
10. TITLE & SIGNATURE OF APPROVING OPERATING OFFICIAL:		

**SECTION II - TO BE COMPLETED BY TECHNICIAN PERSONNEL OFFICE**

11. TYPE AND DATE OF INCENTIVE AWARD(S) OR DATE OF QUALITY INCREASE(S) PREVIOUSLY GRANTED: (Except Length of Service)
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**SECTION III - TO BE COMPLETED BY LOCAL AWARDS COMMITTEE**

12. RECOMMEND APPROVAL OF FOLLOWING AWARDS:			
<input type="checkbox"/> CASH	TOTAL AMOUNT:	INITIAL AMOUNT:	ADDITIONAL AMOUNT:
<input type="checkbox"/> INTANGIBLE BENEFITS			
<input type="checkbox"/> TANGIBLE SAVINGS	ESTIMATED FIRST YEAR SAVINGS:		
<input type="checkbox"/> OTHER:			
<input type="checkbox"/> DISAPPROVED <sup>1</sup>	TITLE:	SIGNATURE & DATE:	

**SECTION IV - TO BE COMPLETED BY APPROPRIATE APPROVING AUTHORITY**

APPROVING AUTHORITY AND ACTION	ADDITIONAL CASH AWARD	RECOMMEND	SIGNATURE & TITLE	DATE
LOCAL COMMANDER: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND	ROBERT W. LESHNER, HIARNG CHIEF OF STAFF	Date
STATE AWARDS COMMITTEE: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		
ADJUTANT GENERAL: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		
NGB INCENTIVE AWARDS BOARD: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <sup>1</sup>	APPROVED	RECOMMEND		

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