

**U.S. DEPARTMENT OF ENERGY
ENVIRONMENTAL MANAGEMENT
CONSOLIDATED BUSINESS CENTER
UPWARD MOBILITY PROGRAM
MEMORANDUM OF UNDERSTANDING**

To:

This will confirm your acceptance of a GS-_____ position which was established as an upward mobility position with a target level of GS-_____

Please understand that selection for this position does not guarantee you automatic promotion. Progression toward the target grade will be based upon your ability to develop proficiency in the duties and responsibilities of the position to which you are assigned, your capacity to acquire proficiency at the next level of difficulty and responsibility, and meet qualification requirements for promotion to the next higher grade.

The Individual Training plan will be developed by your supervisor and discussed with you. You will be required to complete the formal training as well as the self-development portion of the training plan.

Informal evaluations and feedback will be provided periodically. A formal evaluation will be conducted with you by your immediate supervisor and documented at least once each 6 month period, which can include the annual supervisor/employee review, to discuss your work performance and related training and development activities. During these meetings your supervisor will identify areas of concern regarding your progress and allow equal time for your consideration and/or comments.

The program is expected to end in one of the following ways:

- The employee successfully reaches target position,
- The employee's inability to satisfactorily attain the next planned grade level,
- Unforeseen organizational or functional changes which remove the need for, or change the target position, or
- The employee voluntarily requests to be removed from the program.

The success of the Upward Mobility Program will depend on direct and open communication at all times. A copy of this memorandum and the Individual Training Plan will be placed in your Official Personnel Folder and retained until you fulfill the commitment specified above.

Supervisor

Date

I, _____ have reviewed the contents of this memorandum and agree to the provisions set forth.

Employee

Date