DEPARTMENT OF THE ARMY

CAREER REFERRAL LIST - NONAPPROPRIATED FUNDS

For use of this form, see AR 215-3; the proponent agency is ODCSPER.

THE INFORMATION ON THIS FORM IS FOR DEPARTMENT OF THE ARMY USE ONLY.

ISSUING OFFICE:	**ISSUED TO:** *(Include ZIP Code)*
USACFSC-HRP-S 4700 King Street Summit Center, 3d Floor Alexandria, VA 22302-4407	

1. DEADLINE FOR RETURN TO ISSUING OFFICE	2. REQUEST IDENTIFICATION AND DATE OF REQUEST	3. REFERRAL LIST NO. AND DATE ISSUED

4. SYMBOLS USED IN LISTING ELIGIBLES	5. SYMBOLS FOR USE IN REPORTING ACTION		
# Application not attached	*S - Selected*	*CRU - Communication returned unclaimed*	*FR - Failed to reply*
** To provide for declinations*	*D - Declined*	*NS - Not selected*	

6. SELECTION FROM CAREER REFERRAL LISTS WILL BE MADE IN COMPLIANCE WITH THE REQUIREMENTS OF AR 215-3. THIS CAREER REFERRAL LIST IS ISSUED FOR FILLING THE FOLLOWING POSITION:

☐ REGULAR ☐ FULL-TIME ☐ PART TIME ☐ TEMPORARY NUMBER OF VACANCIES

a. POSITION TITLE	*b.* SERIES AND GRADE	*c.* SALARY

d. EMPLOYING NONAPPROPRIATED FUND	*e.* LOCATION

7. ACTION	NAME *(Address and telephone number if DA Form 3433 is not attached)*

8. **TO THE ISSUING OFFICE:** REPORT ON REFERRAL LIST IS SUBMITTED AND THE DA FORMS 3433 OF EMPLOYEES NOT SELECTED ARE RETURNED.

☐ We desire a further list to fill _____ vacancies.

☐ Authority to recruit for the above vacancy is requested.

☐ See reverse for comments.

9. DATE	10. NAME & TITLE OF APPOINTING OFFICER	11. SIGNATURE OF APPOINTING OFFICER