

POST-GOVERNMENT EMPLOYMENT ADVICE OPINION REQUEST*(Read Privacy Act Statement on the last page before completing form.)***REPORT CONTROL
SYMBOL
DD-GC(AR)2412**OMB No. 0704-0467
OMB approval expires
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The public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, Executive Services Directorate, Information Management Division, 4800 Mark Center Drive, Alexandria, VA 22350-3100 (0704-0467). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION.**SECTION I - CONTACT INFORMATION**

1. DOD AGENCY YOU WORKED OR ARE WORKING FOR (e.g., Army, Navy, DLA, OSD, JCS, etc.)		2.a. FIRST NAME	b. MIDDLE INITIAL	c. LAST NAME
3. HOW DO YOU WANT TO RECEIVE YOUR OPINION (X one) <input type="checkbox"/> BY E-MAIL <input type="checkbox"/> BY POSTAL MAIL				
4. MAILING ADDRESS				
a. STREET 1		b. STREET 2		
c. CITY	d. STATE	e. ZIP/POSTAL CODE	f. COUNTRY	
5. TELEPHONE NUMBER (Include Area Code). a. PRIMARY		b. ALTERNATE		
6. PERSONAL E-MAIL ADDRESS. a. PRIMARY		b. ALTERNATE		

SECTION II - SERVICE INFORMATION

7. EMPLOYEE STATUS AT TIME OF SEPARATION		b. RANK/PAY PLAN AND GRADE
a. X one: <input type="checkbox"/> MILITARY <input type="checkbox"/> CAREER CIVILIAN: <input type="checkbox"/> OTHER (Specify as Non Career SES, schedule C, IPA, HQE, SGE)		
c. IF A POLITICAL APPOINTEE, HAVE YOU MADE OTHER ETHICS COMMITMENTS? (If yes, provide detail: did you receive a waiver, or do you anticipate work as a lobbyist)		
8. DOD ORGANIZATION		9. DOD SUPERVISOR'S NAME

10. REASON FOR SEPARATION <input type="checkbox"/> RETIREMENT <input type="checkbox"/> RESIGNATION <input type="checkbox"/> OTHER (Specify)		
11. SEPARATION/RETIREMENT DATE (MM/DD/YYYY)	12. TERMINAL/TRANSITION LEAVE DATE (Enter date(s) in MM/DD/YYYY format, respectively)	
13. DO YOU PLAN TO WORK WHILE ON TERMINAL/TRANSITION LEAVE? <input type="checkbox"/> NO <input type="checkbox"/> YES	14. FOR CIVILIAN EMPLOYEES: DID YOU RETIRE FROM THE U.S. ARMED FORCES? <input type="checkbox"/> NO <input type="checkbox"/> YES	15. ARE YOU A RESERVIST? <input type="checkbox"/> NO <input type="checkbox"/> YES

SECTION III - PRIOR ETHICS INFORMATION

16. PRIOR ETHICS ADVICE		
a. HAVE YOU RECEIVED ANY ETHICS ADVICE OR OPINION FROM ANOTHER GOVERNMENT ETHICS OFFICIAL CONCERNING YOUR PROSPECTIVE EMPLOYMENT? <input type="checkbox"/> NO PRIOR ADVICE RECEIVED <input type="checkbox"/> YES, PRIOR ADVICE RECEIVED (Complete b.)		
b. (1) ETHICS OFFICIAL'S NAME	(2) OFFICE	(3) TELEPHONE NUMBER

17. FINANCIAL DISCLOSURE		
a. IN THE LAST 2 YEARS, HAVE YOU FILED A FINANCIAL DISCLOSURE REPORT? <input type="checkbox"/> NO <input type="checkbox"/> YES, OGE 450 <input type="checkbox"/> YES, OGE 278 (If you file a OGE 278, you must file a termination report no later than 30 days after separation.)		
b. IF YES, POSITIONS FOR WHICH YOU FILED		

SECTION III - PRIOR ETHICS INFORMATION (Continued)

18. LICENSED ATTORNEY: PLEASE INDICATE IF YOU ARE A LICENSED ATTORNEY, EVEN IF YOU ARE NOT EMPLOYED AS AN ATTORNEY BY DOD.

NO , I AM NOT A LICENSED ATTORNEY YES, I AM A LICENSED ATTORNEY

SECTION IV - DOD POSITION INFORMATION

19. POSITIONS HELD AND MAJOR DUTIES: IN WHAT AGENCIES OR ORGANIZATIONS HAVE YOU SERVED DURING YOUR LAST 5 YEARS OF DEPARTMENT OF DEFENSE SERVICE? *For each position, describe your job or briefly describe your major duties during the last 5 years, focusing on supervisory duties and official responsibility requirements relating to defense contracts, especially related to prospective employers, any aspect of the acquisition process, such as requirements development, acting as program manager, deputy program manager or contracting officer, or otherwise involved in the contracting process. Identify names of projects, program, contractors and subcontractors.*

a. CURRENT/MOST RECENT POSITION

(1) ORGANIZATION OR AGENCY	(2) JOB TITLE
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(3) DESCRIPTION

(4) POSITION HELD:
 FROM (MM/YYYY) TO (MM/YYYY)

b. PRIOR POSITION 1

(1) ORGANIZATION OR AGENCY	(2) JOB TITLE
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(3) DESCRIPTION

(4) POSITION HELD:
 FROM (MM/YYYY) TO (MM/YYYY)

c. PRIOR POSITION 2

(1) ORGANIZATION OR AGENCY	(2) JOB TITLE
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(3) DESCRIPTION

(4) POSITION HELD:
 FROM (MM/YYYY) TO (MM/YYYY)

SECTION IV - DOD POSITION INFORMATION *(Continued)*

20. HAVE YOU SERVED IN ANY OF THE FOLLOWING POSITIONS OR PERSONALLY TAKEN ONE OF THE FOLLOWING ACTIONS REGARDING AN ACQUISITION OR CONTRACT IN EXCESS OF \$10 MILLION?

a. PROCURING CONTRACTING OFFICER OR SOURCE SELECTION AUTHORITY? <input type="checkbox"/> NO <input type="checkbox"/> YES	b. A MEMBER OF A SOURCE SELECTION EVALUATION BOARD, OR A CHIEF OF A FINANCIAL OR TECHNICAL EVALUATION TEAM? <input type="checkbox"/> NO <input type="checkbox"/> YES		
c. PROGRAM MANAGER, DEPUTY PROGRAM MANAGER, OR ADMINISTRATIVE CONTRACTING OFFICER? <input type="checkbox"/> NO <input type="checkbox"/> YES	d. AWARD OF A CONTRACT, SUBCONTRACT, MODIFICATION, TASK ORDER OR DELIVERY ORDER, OR PAYMENT OF A CONTRACT CLAIM? <input type="checkbox"/> NO <input type="checkbox"/> YES	e. ESTABLISHING OVERHEAD OR OTHER RATES? <input type="checkbox"/> NO <input type="checkbox"/> YES	f. APPROVAL OF A CONTRACT PAYMENT OR PAYMENTS? <input type="checkbox"/> NO <input type="checkbox"/> YES

g. IF YOU ANSWERED "YES" TO ANY OF THESE QUESTIONS, IDENTIFY THE CONTRACT(S) IN WHICH YOU PERFORMED THAT FUNCTION
(List contract number(s), title(s) and date(s) of last action and summarize your duties/responsibilities related to that contract.)

21.a. DO YOU HOLD A POSITION IN THE EXECUTIVE SERVICE, SENIOR EXECUTIVE SERVICE OR A GENERAL OR FLAG POSITION <i>(Grade O7 and above - not frocked)?</i> <input type="checkbox"/> NO <input type="checkbox"/> YES	b. DID YOU PARTICIPATE IN AN ACQUISITION WITH A VALUE IN EXCESS OF \$10 MILLION? <input type="checkbox"/> NO <input type="checkbox"/> YES
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SECTION V - PROSPECTIVE EMPLOYER INFORMATION

22. CONFLICT OF INTEREST

a. HAVE YOU TAKEN ANY ACTION TO RESOLVE A POTENTIAL CONFLICT OF INTEREST RELATED TO SEEKING EMPLOYMENT EFFORTS, INCLUDING ISSUING A WRITTEN DISQUALIFICATION, CHANGING JOBS, HAD YOUR DUTIES CHANGED, OR TAKEN ANY OTHER ACTION TO RESOLVE A POTENTIAL CONFLICT OF INTEREST? NO YES

b. IF YES, PROVIDE DETAILS:

23. WITH WHOM ARE YOU SEEKING EMPLOYMENT?

24. WHAT ACTIONS HAVE YOU TAKEN CONCERNING YOUR FUTURE EMPLOYMENT *(i.e., sent out resume, interview, filed disqualification, accepted a position)?*

25. DESCRIBE ANY OFFICIAL INVOLVEMENT WITH OR DUTIES YOU HAVE HAD RELATED TO PROSPECTIVE EMPLOYERS LISTED IN BLOCK 23.

26. FUTURE JOB TITLE

a. JOB TITLE	
b. JOB DESCRIPTION <i>(Include information on how this may relate to your Government duties.)</i>	

27. START DATE: WHEN DO YOU PLAN TO START YOUR NEW EMPLOYMENT? *(MM/DD/YYYY)*

I certify that the information provided on this form is true and accurate to the best of my knowledge.

28. PRINTED FULL NAME	29. SIGNATURE	30. DATE SIGNED
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31. ADDITIONAL COMMENTS

INSTRUCTIONS FOR COMPLETING DD FORM 2945

Please answer all questions as appropriate. Then print your full name, sign and date the form.

SECTION I - CONTACT INFORMATION.

1. Please provide the Department of Defense Agency of your last assignment. (Example: US Army, US Air Force, Defense Intelligence Agency.) Do not abbreviate.
2. Enter your first name, middle initial and last name.
3. Contact preference. Mark (X) e-mail or postal mail to indicate your preference on how to provide the written opinion to you.
4. Enter your complete mailing address, including country if this address is outside the United States.
5. Provide a primary telephone number to include the area code or country code if appropriate. Provide an alternate telephone number to include the area code or country code if appropriate.
6. Provide a primary valid e-mail address. Provide an alternate e-mail address if appropriate.

SECTION II - SERVICE INFORMATION.

7. Employee Status.
 - a. X Military, Civilian, or Other. If other, specify.
 - b. Provide military rank or civilian pay grade.
 - c. If a political appointee, provide details of any other ethics commitments.
8. Provide the name of the last organization you were assigned to as a member of DoD. Do not abbreviate.
9. Provide the name of your immediate supervisor of your last position in DoD.
10. Reason for Separation. X one. Mark Retirement if you retired or are retiring from DoD. Mark Resignation if you resigned or are resigning from DoD. Mark Other if neither retirement nor resignation applies.
11. Separation/Retirement Date. Enter date in MM/DD/YYYY format.
12. Terminal/Transition Leave Date(s). Enter date(s) in MM/DD/YYYY format. Provide both dates if applicable.
13. Do you plan to work while on terminal/transition leave? X one.
14. U.S. Armed Forces retirement. X one. If your employee status is a civilian and you previously retired from the U.S. Armed Forces before becoming a civilian employee of DoD, X Yes. X No if you are a civilian employee who did not previously retire from the U.S. Armed Forces.
15. Are you a reservist? X Yes or No.

SECTION III - PRIOR ETHICS INFORMATION.

16. Prior Ethics Advice. X one. Mark Yes if you received any ethics advice (oral or written) from an attorney concerning employment with a civilian company. If so, provide the name, office or organization and telephone number of the attorney. Mark No if you did not receive any prior ethics advice concerning employment by a civilian company.

17. Financial Disclosure. X one. Mark No if you have not filed an OGE 450 or OGE 278 report within the last two years. Mark Yes if you have filed either an OGE 450 or OGE 278 financial disclosure report within the last two years. If either the OGE 450 or OGE 278 is selected, provide the position title you were assigned to when you filed the report.

18. Licensed Attorney. X one. Self explanatory.

SECTION IV - DoD POSITION INFORMATION.

19. Positions Held and Major Duties. Self explanatory. If more than three, continue in block 31, "Additional Comments".

20. Duties and Actions if Involved in a Contract in Excess of \$10 Million.

- a. X one. Self explanatory.
- b. X one. Self explanatory.
- c. X one. Self explanatory.
- d. X one. Self explanatory.
- e. X one. Self explanatory.
- f. X one. Self explanatory.
- g. If Yes was answered to any of questions 20.a. - f., provide the contract number(s), contract title(s), and date(s) you last acted on those contracts and provide a summary of your duties and responsibilities.

21. Senior Executive Service, General or Flag Officer Position. X one. Self explanatory.

SECTION V - PROSPECTIVE EMPLOYER INFORMATION.

22. Conflict of Interest. X one. If you have taken any action to resolve a potential conflict of interest, including issuing a written disqualification, changing jobs, had your duties changed, or taken any other action to resolve a potential conflict of interest, mark Yes. Provide a summary of the actions you took to resolve the conflict of interest. If you have not taken any action to resolve a potential conflict of interest, mark No.

23. Position Sought. Provide the name of the civilian company with which you are seeking employment. Do not abbreviate.

24. Summarize the stage you are at regarding your efforts to become employed with this company for a specific position. Actions include submitting a resume, being interviewed, negotiating compensation, etc.

25. Describe any official involvement or duties you have previously had with the company listed in item 23.

26. Future Job Title. Provide the specific position/job title in which you anticipate being employed. Provide specific duties and responsibilities of the position. Include information on how this may relate to your Government duties.

27. Start Date. Enter date in MM/DD/YYYY format.

28. - 30. Name, Signature and Date. Self explanatory.

30. Additional Comments. Provide any additional information about your pending employment with a civilian employer that you want your ethics attorney to know.

PRIVACY ACT STATEMENT

AUTHORITY: 41 U.S.C. 2104; 5 C.F.R. 2635.107, Joint Ethics Regulation.

PRINCIPAL PURPOSE(S): To enable ethics officials to render ethics advice to military and civilian employees leaving Government service. When completed, records are covered by OGE/GOVT-1, <http://dpcllo.defense.gov/privacy/SORNs/govt/OGEGOVT-1.html>.

ROUTINE USE(S): To disclose the information furnished by the reporting official, in accordance with provisions of section 105 of the Ethics in Government Act of 1978, as amended, to any requesting person.

- a. To disclose, in accordance with section 105 of the Ethics in Government Act, as amended, and subject to the limitations contained in section 208(d)(1) of title 18, U.S.C., any determination granting an exemption pursuant to 208(b)(1) or 208(b)(3) of title 18, U.S.C., to any requesting person.
- b. To disclose pertinent information to the appropriate Federal, State, or local agency responsible for investigating, prosecuting, enforcing, or implementing a statute, rule, regulation, or order, where the disclosing agency becomes aware of an indication of violation or potential violation of civil or criminal law or regulation.
- c. To disclose information to another Federal agency, to a court, or a party in litigation before a court or in an administrative proceeding being conducted by a Federal agency, either when the Government is a party to a judicial or administrative proceeding or in order to comply with a subpoena issued by a judge of a court of competent jurisdiction.
- d. To disclose information to any source when necessary to obtain information relevant to a conflict-of-interest investigation or determination.
- e. By the National Archives and Records Administration or the General Services Administration in records management inspections conducted under authority of 44 U.S.C. 2904 and 2906.
- f. To disclose information to the Office of Management and Budget at any stage in the legislative coordination and clearance process in connection with private relief legislation as set forth in OMB Circular No. A-19.
- g. To disclose information to the Department of Justice, or in a proceeding before a court, adjudicative body, or other administrative body before which OGE is authorized to appear, when: OGE, or an employee of OGE in his or her official capacity, or any employee of OGE in his or her individual capacity (where the Department of Justice or OGE has agreed to represent the employee); or the United States (when OGE determines that litigation is likely to affect OGE), is a party to litigation or has an interest in such litigation, and the use of such records by the Department of Justice or OGE is deemed by OGE to be relevant and necessary to the litigation provided, however, that the disclosure is compatible with the purpose for which such records were collected.
- h. To disclose the public financial disclosure report and any accompanying documents to reviewing officials in a new office, department or agency when an employee transfers or is detailed from a covered position in one office, department or agency to a covered position in another office, department or agency.
- i. To disclose information to a Member of Congress or a congressional office in response to an inquiry made on behalf of an individual who is the subject of the record.
- j. To disclose information to contractors, grantees, experts, consultants, detailees, and other non-Government employees performing or working on a contract, service, or other assignment for the Federal Government, when necessary to accomplish an agency function related to this system of records.

NOTE: When DoD is requested to furnish such records to the Director or other authorized officials of the Office of Government Ethics (OGE), such a disclosure is to be considered as made to those officers and employees of the agency which co-maintains the records who have a need for the records in the performance of their official duties in accordance with the Ethics in Government Act of 1978, 5 U.S.C. app., and other ethics-related laws. Executive orders and regulations conferring pertinent authority on OGE, pursuant to the provision of the Privacy Act at 5 U.S.C. 552a(b)(1).

The DoD "Blanket Routine Uses" found at http://dpcllo.defense.gov/privacy/SORNs/blanket_routine_uses.html may apply to these records. Any release under a blanket routine use will be compatible with the purpose of the collection.

DISCLOSURE: Voluntary; however, failure to fully disclose information requested may result in receipt of incomplete advice or inability to provide written advice. This may result in a delay in being hired by a Department of Defense contractor or receipt of compensation from such contractor. Failure to comply may also result in the imposition of administrative penalties in accordance with 41 U.S.C. 2105(c).