

**Employee Request for Consideration of Mitigating Factors**

Employee Name: \_\_\_\_\_ Title: \_\_\_\_\_ EIN \_\_\_\_\_

Unit Name: \_\_\_\_\_ Fin #: \_\_\_\_ - \_\_\_\_\_

\*\*\*\*\*PLEASE USE ADDITIONAL SHEETS OF PAPER AS NEEDED\*\*\*\*\*

**1. Describe the mitigating factor by addressing each of these criteria:**

- a) What was the significant occurrence?
  
- b) When did it occur (dates)?
  
- c) What specific NPA unit indicator was impacted by this occurrence?
  
- d) How was it beyond your control?
  
- e) What actions did you take to offset the effects of this event?
  
- f) What was the impact on the unit indicator; unit summary; and composite summary?

**2. Describe the trends of the unit indicator prior to the occurrence and attach documentation.**

**3. Attach your NPA Report Card Detail (Mitigated and unmitigated) with the proposed indicator score annotated on the report card.**

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

**Evaluator Checklist for Consideration of Mitigating Factors**

Employee Name: \_\_\_\_\_ Title: \_\_\_\_\_ EIN \_\_\_\_\_

Unit Name: \_\_\_\_\_ Fin #: \_\_\_\_ - \_\_\_\_

\*\*\*\*\*PLEASE ANSWER THE FOLLOWING QUESTIONS\*\*\*\*\*

1. Was the occurrence or NPA unit indicator one that was already mitigated in NPA? YES NO
2. Do you agree with the NPA unit indicator affected as stated by the employee? YES NO
3. Did the occurrence cause a negative result in one or more of the unit indicators? YES NO
4. Does the documentation supplied by the employee support this? YES NO
5. Was the occurrence beyond the employee's control? YES NO
6. Did the employee make any effort to offset the occurrence? YES NO
7. Was the impact of the occurrence enough to a cause downward change in the NPA Composite Summary that resulted in a lower PFP overall rating? YES NO
8. Have you verified that mitigated score, cell value and end results as annotated by the employee on the NPA Report Card Detail (mitigated and unmitigated) is accurate? YES NO
9. Have you verified that the Overall Performance Rating from PES was lowered by at least a whole point due to this occurrence (PES calculates to 32 decimal points and displays 5 decimal points? Anything less than .5xxxxx rounds down) YES NO

Please record the employee's actual Overall Performance Rating from PES and the rating that would have been achieved but for the mitigating circumstance.

<b>PFP OVERALL PERFORMANCE RATING</b> <i>(Please attached NPA Report Card Detail (mitigated and unmitigated – with new calculations) along with the End-of-Year Overall Performance rating from PES).</i>	
ACTUAL	RECOMMENDED
_____	_____

**CLUSTER REVIEW & APPROVAL**

Evaluator Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_ (CHECK ONE)

Reason for disapproval:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PCES Cluster Executive**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPROVED** \_\_\_\_\_ **DISAPPROVED** \_\_\_\_\_ (CHECK ONE)

**Reason for disapproval:**

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**AREA VALIDATION**

**Area Manager, Human Resources**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**AREA VALIDATION**

**Area Manager, Operations Support**  
(or designee)

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Reason for disapproval:**

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Entered to PES \_\_\_\_\_ (date) \_\_\_\_\_ (initials)

**INTERNAL USE ONLY (HQ SER)**  
Received \_\_\_\_\_ (date) \_\_\_\_\_ (initials)