



**U.S. Army Medical Command  
Voluntary Early Retirement Authority (VERA), Voluntary Separation Incentive Pay (VSIP)  
and VSIP II for Workforce Downsizing or Restructuring  
Fiscal Year 2023 Application Form**



**(Retirement Effective Date Must Comply with MEDCOM Guidance)**

Before initiating your application, communication with your supervisor/manager is required to determine if your position is being considered for restructuring and eligible for this buyout. The buyout amount can be up to the lesser of \$25,000 or the amount an employee would be entitled to under the severance pay formula. The buyout amount is not discretionary or negotiable. Handwritten application acceptable.

**(PART I) Employee Section:** This document constitutes my application for the workforce buyout (VSIP) under the following category:

**With VSIP: Optional Retirement:** \_\_\_\_\_ **Resignation:** \_\_\_\_\_ **VERA (Early Retirement):** \_\_\_\_\_ **or VERA (Only):** \_\_\_\_\_

**Full Legal Name:** \_\_\_\_\_ **Work Telephone Number:** \_\_\_\_\_

**Pay Plan-Series-Grade:** \_\_\_\_\_ **Position Title:** \_\_\_\_\_

**Organization:** \_\_\_\_\_ **Duty Station/City/State:** \_\_\_\_\_

**Anticipated Retirement/Separation Date** (as early as possible, but NLT 30 Sep): \_\_\_\_\_

**Retirement System (CSRS or FERS):** \_\_\_\_\_ **Date Eligible for Retirement:** \_\_\_\_\_

**Servicing CPAC:** \_\_\_\_\_

**Waiver Required for:**

- \_\_\_\_\_ Receiving a retention incentive.
- \_\_\_\_\_ Receiving a Special Salary rate.
- \_\_\_\_\_ Occupying a position defined as "hard to fill".

**DECLARATION: IF THE INCENTIVE IS APPROVED, I UNDERSTAND THAT:**

>By accepting the restructuring buyout incentive, I become ineligible for registration in the Priority Placement Program (PPP), severance pay, and discontinued service retirement.

>I cannot be employed within DOD for 1 year after my separation date, and I must repay the full incentive amount if reemployed by the Federal Government under any type of appointment or under a personal services contract within 5 years after separation with an incentive.

>Use of these incentives is a management tool, not an employee entitlement.

>By signing this application, I attest that I am submitting it voluntarily.

>If the incentive is approved, I elect one of the following payment terms. After approval by HQ MEDCOM, or designee, the personnel action and elected payment terms are irrevocable once the appropriate DD form is signed.

\_\_\_\_\_ Lump sum payment at separation (DD Form 2903-1).

\_\_\_\_\_ Equal biweekly payments until the buyout is paid in full (NTE 1 year from the date of separation) (DD Form 2903-2).



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\_\_\_\_\_ One-Half of the payment 6 months after the date of separation and the second half 6 months later (DD Form 2903-3).

<b>Employee Signature</b>	<b>Date</b>
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**(PART 2) MANAGEMENT SECTION:** To be completed by the applicant's immediate first-line supervisor.

I concur with the employee's workforce buyout (VSIP) application: Yes: \_\_\_\_\_ No: \_\_\_\_\_ (VERA only): \_\_\_\_\_

PP-Series-Grade: \_\_\_\_\_

Position Title: \_\_\_\_\_

Para/Line No: \_\_\_\_\_ Unit Identification Code (UIC): \_\_\_\_\_

**SELECT AND INITIAL ONE OF THE FOLLOWING:**

\_\_\_\_\_ **Downsizing** – I certify that the position identified above is the applicants' authorized position and after approval by HQ MEDCOM, it will be abolished. Funding will be stripped effective on the retirement date.

\_\_\_\_\_ **Restructuring** – I certify that the position identified above is the applicants' authorized position and after approval by HQ MEDCOM, it will be restructured as indicated below. IAW DoDI 1400.24, Vol. 1702, Jun 13, 2008, reissued April 1, 2009; position restructuring is restricted to the vacancy created by the application of the buyout (i.e. the applicant's authorized position).

\_\_\_\_\_ **VSIP II Application** - Applicant in a non-impacted authorized position requests VERA/VSIP and is being backfilled by a RIF's impacted employee. After approval by HQ MEDCOM, the impacted employee's authorized position, identified above, will be abolished and the impacted employee will be reassigned to the non-impacted authorized position. MP2 registration should occur and coordination with the local CPAC is required. (See VSIP II guidance).

\_\_\_\_\_ **Over hire** - I certify that the position identified above is an over hire position. After approval the requesting MTF/activity end strength will be decremented by one (1) for every over hire approved and funding will be stripped effective the date of retirement..

**The vacated position will be restructured to:**

Position Title: \_\_\_\_\_

Pay Plan/Series/Grade: \_\_\_\_\_

**The reasons for the change(s) are as follows:**

- \_\_\_\_\_ Changing mission requirements of the organization requires position change.
- \_\_\_\_\_ Converting position to non-supervisory...keeping with current Army goals to flatten Federal organizations.
- \_\_\_\_\_ Current incumbent fails to meet changing qualification requirements for this position (e.g. educational requirement for GS-1102).
- \_\_\_\_\_ Reduce overall organizational costs.
- \_\_\_\_\_ Change the structure of the organization.
- \_\_\_\_\_ Reduce the civilian workforce.
- \_\_\_\_\_ Other (Explain)

**Supervisor Recommendation:**    \_\_\_Approve    \_\_\_Disapprove

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

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



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**Commander/Activity Head Recommendation:** \_\_\_ Approve \_\_\_ Disapprove

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

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

**Waiver Justification:**

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

\*\*\*\*\*FOR HQ MEDCOM USE ONLY\*\*\*\*\*

**MEDCOM Chief of Staff Decision:** \_\_\_ Approved \_\_\_ Disapproved

Printed Name \_\_\_\_\_ Signature: \_\_\_\_\_

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