

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
INTERNATIONAL SERVICES

FOREIGN SERVICE MEMBER'S ACCOMPLISHMENT STATEMENT

1. Name <i>(Last, First, Middle Initial)</i>		2. Appraisal Period From: _____ To: _____	
3. Official Position Title	4. Grade/Step or Pay Level	5. Duty Station	
6. Rated Employee's Accomplishment Statement			
7. Rated Employee's Signature			Date

This program or activity will be conducted on a nondiscriminatory basis without regard to race, color, religion, national origin, age, sex, marital status, or disability.

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