

**CHECKLIST FOR TECHNICIAN
SEPARATIONS OTHER THAN RETIREMENT**

ARMY: Submit this form through **GEARS** with your **Resignation Letter & Standard Form 52** before separation date.

AIR: Submit this form to the **Remote Designee** with your **Resignation Letter & Standard Form 52** before separation date.

TECHNICIAN NAME: _____

DATE OF PROPOSED SEPARATION DATE: _____ (Date)

Technician's Current Home of Record address to receive Separation packet at:

You are encouraged to fill this form out with the HRO or the Remote Designee

DATE OF PHONE CALL OR APPOINTMENT WITH HRO: _____ (Date & Time)

*We are open T-F 0630-1700, scheduled appointments are encouraged however, and walk-ins are always welcome.

We are located at: Fifth Regiment Armory, 29th Division Street Baltimore, MD 21201

Our office numbers are 410-576-6047, 410-576-6046, 410-576-6121, 410-576-6052

1. Type of Separation: (Check all that apply)

- I am resigning my technician employment and not transferring to another Federal Agency.
- I was non-retained by a military retention board and will be Terminated due to loss of military membership.
- I am transferring to another Federal Agency.
_____ (Name of Federal Agency)
_____ (Name, phone number and email of POC of gaining agency HRO)
- Other _____ (Please explain)

2. Items to discuss with the HRO:

- SF-8: Unemployment Compensation; Army (code 422), Air (code 424)
- SF 3106-3106A (FERS Members): Application for Refund of Retirement Deductions
- SF 2802/2802B (CSRS Members): Application for Refund of Retirement Deductions
- TSP Packet
- FEHB: Discuss TCC and fill out SF 2810 to terminate if needed
- RI 70-05: TCC form
- FEGLI: fill out SF 2819 to terminate if needed
- NGAUS: If member has coverage, fill out NG 76 to cancel
- Leave: Request SF-1150 for any unused leave. Upload to eOPF
- Update/verify HOR address to receive copy of SF50
- Receive copies of entire eOPF

3. Certification:

I certify the above information is correct and I understand my elections, restoration rights, and benefits. I also acknowledge that I must remain in contact with the HRO till the separation is final.

_____ (Type or Print Name)
_____ (Personal Email)

_____ (Signature and Date)
_____ (Cell Phone Number)

If there are any questions regarding the above please contact the HRO-Services section at:

usaf.md.175-wg.list.hro-services@mail.mil

