

**Incentive Award Recommendation**  
**(Performance, Special Act or Service, Time-off, Quality Step Increase)**  
 For use of this form, see NGKS Supplement 1 to NGB TPR 451

<b>1. Name</b> (Last, First, MI)/SSAN	<b>2. Position</b> (Title, Grade, Step, Salary)
<b>3. Unit or Activity/Location</b>	<b>4. Position during period of recommendation or date of act</b> (if other than Block 2)
<b>5. Type of Award</b> (Select One) <input type="checkbox"/> Performance <input type="checkbox"/> Special Act or Service <input type="checkbox"/> Time-off <input type="checkbox"/> Quality Step Increase	<b>6. Award Amount</b> Performance = % of salary 1-10% Time-off = # of hours NTE 40 hours Special Act or Service = \$50 - \$500
<b>7. Period of Recommendation or Date of Act</b>	<b>8. Date of Recommendation</b>

**9. Justification**

**SIGNATURES**

<b>10. Recommending Supervisor</b>	<b>11. Local Approving Authority</b> (Per Appendix A of NGKS Supplement 1 to NGB TPR 451)
Typed Name and Signature	Typed Name and Signature
<b>12. HRO Incentive Awards Program Manager</b>	<b>13. Human Resources Officer</b>