
FQS Transmittal Log- Form Instructions

TO BE COMPLETED BY RESERVIST PROGRAM MANAGER/SUPERVISOR OF RECORD

¹ **Review reason**

Select appropriate reason for review

² **Section A. Employee Information**

³ Enter position title being reviewed and recommended proficiency level

⁴ Enter employees full name (First, MI, Last)

⁵ Enter employee Personal Identification Number (PID)

⁶ Select the appropriate type of employee

⁷ Enter the employees current FQS title

⁸ Enter 4 letter mnemonic for the position (i.e. HUGS- Housing Unit Group Supervisor)

⁹ Check the current proficiency level

¹⁰ **Section B. Reservist Program Manager/Supervisor of Record**

¹¹ Enter date package received by Reservist Program Manager/Supervisor of Record

¹² Enter checkmarks indicating documentation received

¹³ List 'Other' Documents received

¹⁴ Checkmark appropriate 'Non-FEMA' documents received

¹⁵ List 'Other' Documents received

¹⁶ After reviewing documentation received indicate that the package was Forwarded or Not Forwarded

¹⁷ Enter date forwarded to Certifying Official

¹⁸ If package not forwarded- Check appropriate reason and enter detailed explanation

¹⁹ Reservist Program Manager/Supervisor of Record - Print Name

²⁰ Reservist Program Manager/Supervisor of Record - Signature

²¹ Enter date of decision

TO BE COMPLETED BY CERTIFYING OFFICIAL

²² **Section C. Certifying Official (CO)**

²³ CO enters date package received from Reservist Program Manager/Supervisor of Record

²⁴ Indicate if this is a Non-Supervisory position- (if Supervisory go to 33)

²⁵ Indicate appropriate certification recommendation

²⁶ Enter date forwarded to Certifying Authority

²⁷ If decision is not to certify, provide detailed explanation

²⁸ Indicate if this is a Supervisory Position

²⁹ Review package and forward to QRB Chair

³⁰ Enter date forwarded to QRB Chair

³¹ CO- Print name

³² CO- Sign name

³³ Enter date signed

TO BE COMPLETED BY QUALIFICATION REVIEW BOARD CHAIR

³⁴ **Section E. Qualification Review Board (QRB)**

³⁵ QRB Chair- enter date package received

³⁶ QRB checkmark appropriate decision

³⁷ Enter date decision forwarded to Certifying Authority

³⁸ If the decision is not to certify- provide detailed explanation

³⁹ QRB Chair- Print name

⁴⁰ QRB Chair- Sign name

⁴¹ Enter date signed

TO BE COMPLETED BY CERTIFYING AUTHORITY

⁴² **Section F. Certifying Authority (CA)**

⁴³ CA- enter date package received

⁴⁴ Indicate appropriate certification recommendation

⁴⁵ Enter date decision forwarded to Certifying Official

⁴⁶ If decision is not to certify- enter detailed explanation

⁴⁷ CA- Print name

⁴⁸ CA- Sign name

⁴⁹ Enter date signed

TO BE COMPLETED BY CERTIFYING OFFICIAL (#56-57) and RESERVIST PROGRAM MANAGER/SUPERVISOR OF RECORD (#58-69)

⁵⁰ **Section G. Notification of Decision: Final Actions**

⁵¹ CO forwards decision to Reservist Program Manager/Supervisor of Record

⁵² Enter date decision forwarded

⁵³ Decision sent to IQCS Data Entry

⁵⁴ Date sent to IQCS Data Entry

⁵⁵ Decision sent to FQS Unit/ADD

⁵⁶ Date sent to FQS Unit/ADD

⁵⁷ Reservist Program Manager/Supervisor of Record submits SF52 to Human Capital. (when there is a Cadre change or Salary change)

⁵⁸ Date sent to Human Capital

⁵⁹ Decision Letter sent to Employee

⁶⁰ Date Decision Letter sent