

CONTINUED SERVICE AGREEMENT (CSA) ARMY DIRECTOR ACQUISITION CAREER MANAGEMENT (DACM) OFFICE NAVAL POST GRADUATE SCHOOL (NPS) PROGRAM CIVILIAN PARTICIPANTS

The Army Director, Acquisition Career Management Office requires that Army Acquisition Workforce (AAW) civilians selected to participate in all civilian Naval Postgraduate School (NPS) Programs complete a Continued Service Agreement (CSA) as part of their application process. Supervisors will ensure the AAW civilian is informed in advance of this requirement. The AAW civilian who completes a CSA agrees to and acknowledge the following statements:

- a. I agree that upon completion of the training in which I have requested, if I receive salary covering the training period, I will serve in the Department of War (DoW) the length of the required period of obligated service. The civilian Naval Postgraduate School Program is a 2-year program. The period of obligated service is 24 months. The period of obligated service begins after the ending date of the last course of the 2-year program. Supervisors will ensure the AAW civilian is informed in advance of this requirement. DoW agencies include Army, Navy, Air Force, Marines, and Space Force.
- b. I acknowledge that if I leave the DoW to enter service of a Federal Agency other than DoW before completing the period of obligated service agreed to in item a above, I agree to reimburse the Federal Government for the cost of tuition, laboratory, and technology fees paid in connection with my training. I will give the Army DACM Office Program Manager, my current supervisor, and my servicing personnel advance notice of at least 30 working days during which time, I will be held liable to reimburse all monies paid on my behalf to the Federal Government prior to my departure from the DoW. However, the amount of reimbursement may be reduced on a pro rata basis for the percentage of completion of the obligated service. (For example, if the cost of training is \$900 and I complete two-thirds of the obligated service, I will reimburse the Federal Government \$300 instead of the original \$900). Requests to waive reimbursement of training dollars will be addressed to Army Director, Acquisition Career Management Office, ATTN: Branch Chief, Acquisition, Education and Training, 9900 Belvoir Road, Building 201, Suite 101 Fort Belvoir, VA 22060.
- c. I acknowledge that this agreement does not in any way commit the Federal Government to continue my employment. I understand that if there is a transfer of the unfulfilled portion of my service obligation to another DoW agency the agreement remains in effect until I have completed my obligated service with that DoW agency or organization.
- d. I acknowledge that if I leave my current Army acquisition workforce position in which I was eligible to participate in the program and accept a position that is no longer coded as Army Acquisition workforce, I will no longer receive funding by the Army DACM Office. My new organization has the option of funding the remaining of the training cost.
- e. I acknowledge that if I leave my current Army acquisition workforce position in which I was eligible to participate in the program and accept another Army Acquisition workforce position coded as Army acquisition and I do not meet the certification level required for that position but fall within my certification grace period, I will continue to receive funding by the Army DACM Office.
- f. I acknowledge that if I am outside of my certification grace period of my current acquisition workforce position or have not obtained the certification level required for my current position within the required established time frame, I will be removed from the program and no longer receive funding from the Army DACM Office.
- g. I understand that any amounts which may be due to the Federal Government because of any failure on my part to meet the terms of this agreement will be recovered by such methods as are approved by law.

- h. I further agree to obtain prior approval from my organization and the person responsible for authorizing government training requests of any proposed change in my approved training program involving courses and scheduled changes, withdrawals, or incompletions.
- i. I acknowledge that all reimbursements will be made by money order, personal check, cashier's or certified check, payable to the U.S. Treasury and sent to Army Director Acquisition Career Management Office, ATTN: NPS Program Manager, 9900 Belvoir Road, Building 201, Suite 101, Fort Belvoir, VA 22060-5567.

PERIOD OF OBLIGATED SERVICE:

FROM (enter date): _____ **TO (enter date):** _____

I am not receiving any contributions, awards, or payments in connection with this training, from any other government agency or non-government organization and shall not accept such without first obtaining approval from the authorizing training official. I agree that should I fail to complete the requested training successfully due to circumstances within my control, I will reimburse the Federal Government for all training costs associated with my attendance. Circumstances within my control are listed below in which I will reimburse the Federal Government should I fail to successfully complete the requested training:

1. An "incomplete", "failed", or a grade less than a "B" in a course.
2. "Drop" or "withdraw" from a course after the course start date.
3. Withdrawal from the program after commencement of the program and funds have been incurred.
4. Non-fulfillment of the period of obligated service dates.

EMPLOYEE PRINT FIRST NAME	EMPLOYEE PRINT LAST NAME	FUNCTIONAL AREA/ACQUIRED CERTIFICATION LEVEL

Employee's digital signature

Date Signed

Supervisor's CAPPMS digital signature

Date Signed