UNITED STATES POSTAL SERVICE®

Preferred Assignment Multiple Bid Card

Personal Information	
Name *(Print or type name Last, First, and MI)*	Employee Identification Number *(Located on pay stub)*
Posting Number/Notice Number	Seniority Date

Present Assignment	
Craft	Pay Location
Position Title	Route Number *(Carrier)*

Choice	Position Number	Choice	Position Number	Choice	Position Number
1		16		31	
2		17		32	
3		18		33	
4		19		34	
5		20		35	
6		21		36	
7		22		37	
8		23		38	
9		24		39	
10		25		40	
11		26		41	
12		27		42	
13		28		43	
14		29		44	
15		30		45	

Applicant's Signature *(See Reverse for Privacy Act Statement)*	Date Submitted *(MM/DD/YYYY)*

(Clerks: See Reverse — Scheme Training/Testing)

Privacy Act Statement: Your information will be used to determine your qualifications and suitability for a preferred assignment. Collection is authorized by 39 U.S.C. 1001.

Providing the information is voluntary, but if not provided, you may not receive full consideration for the assignment. We may disclose your information as follows: in relevant legal proceedings; to law enforcement when the USPS® or requesting agency becomes aware of a violation of law; to a congressional office at your request; to entities or individuals under contract with USPS; to entities authorized to perform audits; to labor organizations as required by law; to federal, state, local or foreign government agencies regarding personnel matters; to the Equal Employment Opportunity Commission; to the Merit Systems Protection Board or Office of Special Counsel; on official bulletin boards in Postal Service™ facilities, and to managerial organizations recognized by USPS.

Clerk Craft -- Scheme Training/Testing Alternative Election

If I am the Senior Bidder for a preferred duty assignment that requires scheme knowledge I elect the following Scheme Training/Testing Alternative:

Check One

a. ☐ I elect to use annual leave for required scheme training/testing. I understand that when I pass the appropriate scheme examination and accept the position, that the annual leave I have used will be converted to hours worked and my annual leave balance will be recredited with the like number of hours.

b. ☐ I elect to enter into scheme training/testing outside my regularly scheduled work hours. I understand that I will not receive compensation at the appropriate overtime rate unless I pass the appropriate scheme examination and accept the position.

Employee's Signature

For Human Resources Use Only

Qualification Requirements	Attendance Record
Performance	Personnel Folder
Qualified Driver *(Check one)* ☐ Yes ☐ No	Schemes

Remarks