



Personnel Actions  
After  Assignment

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>				DATE PREPARED <b>11 SEPTEMBER 1963</b>	
1. SERIAL NUMBER  <input type="text"/>		2. NAME (Last-First-Middle)  <input type="text"/>			
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>09 15 63</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>
6. FUNDS V TO V CF TO V		V TO CF XX CF TO CF		7. COST CENTER NO. CHARGE-ABLE <b>4135-5700-1000</b>	
8. LEGAL AUTHORITY (Completed by Office of Personnel)			9. ORGANIZATIONAL DESIGNATIONS <b>DDP NH BRANCH 3</b>		
10. LOCATION OF OFFICIAL STATION			11. POSITION TITLE <b>OPS OFFICER</b>		
12. POSITION NUMBER <b>418</b>		13. CAREER SERVICE DESIGNATION <b>D</b>		14. CLASSIFICATION SCHEDULE (GS, LB, etc.) <b>GS</b>	
15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>12</b>		17. SALARY OR RATE <b>9790</b>	
18. REMARKS  FROM: DDP/NH <input type="text"/>  <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;">Recorded by GSPD <i>Lhr</i></div>					
DATE SIGNED <b>9/12/63</b>		18a. SIGNATURE OF OFFICER <i>[Signature]</i>		DATE SIGNED <b>13 Sep 63</b>	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE	20. EMPLOY. CODE	21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE	23. INTER-STATE CODE
24. DATE OF BIRTH	25. DATE OF DEATH	26. DATE OF LEI			
28. NTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CHANGE/LOCATION DATA	33. SECURITY REQ. NO.
35. VET. PREFERENCE	36. SERV. COMP. DATE	37. LONG. COMP. DATE	38. CAREER CATEGORY	39. FECA / HEALTH INSURANCE	40. SOCIAL SECURITY NO.
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA	
45. POSITION CONTROL CERTIFICATION	46. D.P. APPROVAL	DATE APPROVED			

SECRET  
(When Filled In)

77A

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 17 JULY 1963	
1. SERIAL NUMBER XXB		2. NAME (Last-First-Middle)					
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06   09   63		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS		7. COST CENTER NO. CHARGEABLE 4135-5700-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 3				10. LOCATION OF OFFICE STATION			
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 400		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 2		17. SALARY OR RATE \$ 9790	
18. REMARKS FROM: DDP/FE [redacted] Tray 27 1 COPY TO FINANCE DIVISION AND OFFICE OF SECURITY [redacted] [redacted]							
[redacted]		DATE SIGNED 7/18/63		19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [redacted]		DATE SIGNED 23 July 63	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING SUPERVISOR 64700 WH		22. STATION CODE 45015	23. INT/OFF CODE	24. # OF DEPT CODE 3	25. DATE OF BIRTH NO. DA. YR.
26. NET EXPIRES NO. DA. YR.	27. SPEC. A. REFERENCE	31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA TYPE NO. DA. YR.		33. SECURITY REG. NO.	34. SER
28. VET. PREFERENCES CODE 0 - NONE 1 - 5 BY 2 - 10 BY		29. DEPT. COMP. DATE	30. LEAV. COMP. DATE	35. CAREER CATEGORY CAREERS - CODE PROV/TIMP		36. REG. / HEALTH INSURANCE CODE 0 - WAIVER 1 - YES	
37. SOCIAL SECURITY NO.		38. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - 90 DAYS IN SERVICE 2 - MORE IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)		39. LEAVE CAT. CODE	40. FEDERAL TAX DATA FORM PREVIOUS CODE 1 - YES 2 - NO		41. STATE TAX DATA FORM PREVIOUS CODE 1 - YES 2 - NO
42. POSITION CONTROL CERTIFICATION 07/25/63				43. O.P. APPROVAL		44. DATE APPROVED 23 July 63	

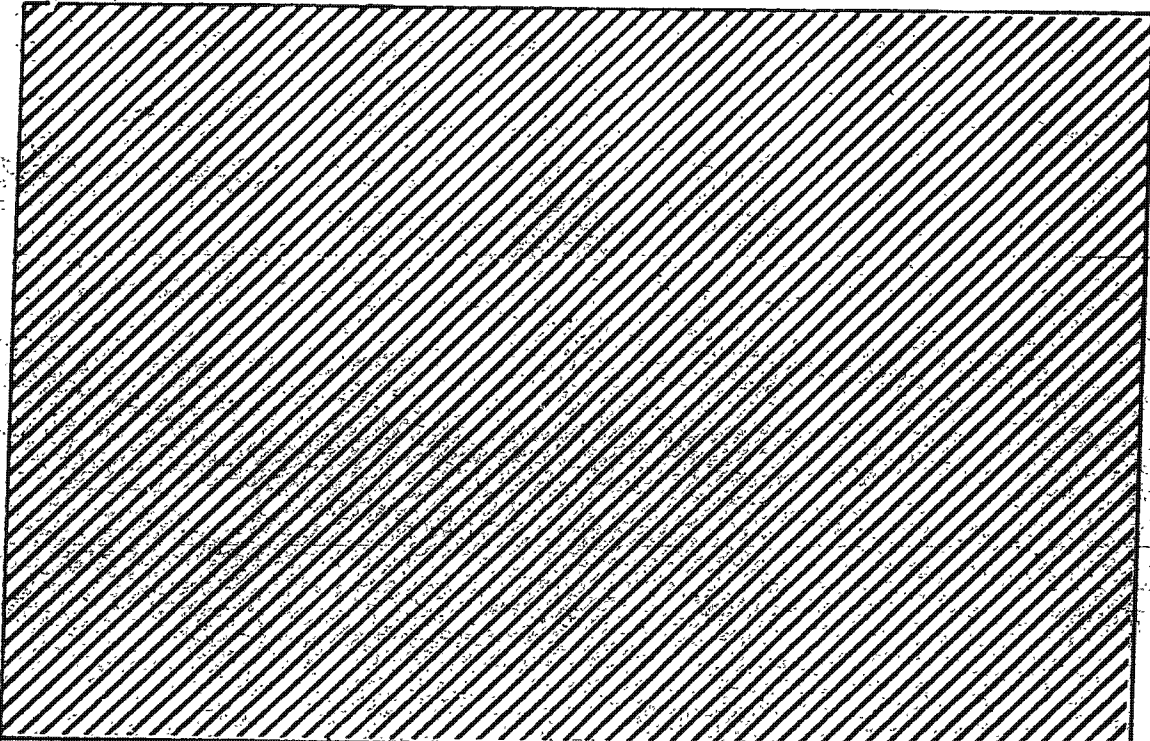
Recorded by  
CSPD  
EJP

SECRET

*30 cm*

*Jiv*

SECRET  
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
<input type="text"/>	<i>Wife - German</i>	<i>63-097</i>

There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent\*) for an illness, injury, or death incurred on *23 Nov 62*. *Ruptured muscles*

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE <i>3 MAY 1963</i>	SIGNATURE OF BSD REPRESENTATIVE <i>B. De Felice</i>
-------------------------------------	--

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

Personnel Actions  
prior to   
Assignment

SECRET

REPRODUCTION MASTERS

BIOGRAPHIC PROFILE

SECRET

H a n d l e   W i t h   C a r e

CONFIDENTIAL

(When Filled In)

NOTICE OF CREDITABLE SERVICE

[FOR LEAVE PURPOSES]

PREPARE IN ORIGINAL FROM STANDARD FORM NO. 144 AND FORWARD TO FINANCE OFFICE.

NAME (Last, First, Middle)

~~██████████~~ (P)

OFFICE (and Division)

*File 2 mar 53*  
POSTION  
Gr 4b

DDP/WH

SERVICE COMPUTATION DATE:

24 Dec 1948

2 March 1953

SIGNATURE DA

JOHN L. BISCHOPP, Chief/SCAFS

CHIEF, TRANSACTIONS AND RE. BRANCH

FORM NO. 37-157  
1 MAR 54

CONFIDENTIAL

(4)

ORIGINAL BIOGRAPHIC PROFILE

---

(sanitized version in file)



Personnel Actions After  
 Assignment

WH

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI MEMORANDUM DATED 1 AUGUST 1956; SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
[REDACTED]	[REDACTED]	91	700 CF	GS 12 3	\$10,105	\$10,640

POSTED ON  
01-40  
8 JAN 1964

WH-2

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
[REDACTED]		[REDACTED]		64 700 CF						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last EH Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 12	2	\$ 9,790	11/29/62	GS 12	3	\$10,105	11/24/63			
8. Remarks and Authentication										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS _____ AUDITED BY _____										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE: <i>JWH</i>						DATE: 7 Oct 1963				
PAY CHANGE NOTIFICATION										

DLS: 13  
KX SEPT 63

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION													
NCB													
1. SERIAL NUMBER		2. NAME (LAST FIRST-MIDDLE)											
		[REDACTED]											
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT						09   15   63		REGULAR					
6. FUNDS		V TO V		V TO CP		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
CP TO V		X		CP TO CP		4135 5700 1000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION							
DDP/WH						STATION							
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION					
OPS OFFICER						0418		D					
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP		17. SALARY OR RATE					
GS			0136.01			12 2		9790					
18. REMARKS													
<div style="border: 1px solid black; padding: 5px; display: inline-block;">           POSTED BY            07-45            [Signature]         </div>													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. MONTHS Code		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF SER	
37	10	51400	WH	45075	3								
29. HIE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO.		34. SEX			
			1 - CSC 2 - PICA 3 - NONE			EOD DATA							
35. VEI PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.			
0 - NONE 1 - 5 PT 2 - 10 PT						CAN SERV PROV TEMP		0 - WAIVER 1 - YES					
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT.	43. FEDERAL TAX DATA		44. STATE TAX DATA						
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)				CODE	FORM EXECUTED CODE 1 - YES 2 - NO		NO TAX EXEMPTIONS		FORM EXECUTED 1 - YES 2 - NO		CODE NO. 187 STATE CODE EXEMP		
SIGNATURE OR OTHER AUTHENTICATION													
<div style="border: 1px solid black; padding: 5px; display: inline-block;">           POSTED            09/24/63 WK         </div>													

MHC: 31 JULY 63

SECRET  
(When Filled In)

OCB NOTIFICATION OF PERSONNEL ACTION																																																																																																																																							
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)																																																																																																																																					
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT																																																																																																																																	
REASSIGNMENT				06 09 63		REGULAR																																																																																																																																	
6. FUNDS		7. V TO V		8. V TO CF		9. LOST CARRIER NO. CHARGEABLE		10. CSC OR OTHER LEGAL AUTHORITY																																																																																																																															
CF TO V		X		CF TO CF		4135 5700 1000		50 USC 403 J																																																																																																																															
11. ORGANIZATIONAL DESIGNATIONS					12. LOCATION OF OFFICIAL STATION																																																																																																																																		
DDP WH					STATION																																																																																																																																		
13. POSITION TITLE					14. POSITION NUMBER		15. SERVICE DESIGNATION																																																																																																																																
OPS OFFICER					0400		D																																																																																																																																
16. CLASSIFICATION SCHEDULE (GS, LB, etc.)			17. OCCUPATIONAL SERIES		18. GRADE AND STEP		19. SALARY OR RATE																																																																																																																																
GS			0136.01		12 2		9790																																																																																																																																
20. REMARKS																																																																																																																																							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																																																																																																																																							
<table border="1"> <tr> <td colspan="2">21. ACTION CODE</td> <td colspan="2">22. EMPLOY. CODE</td> <td colspan="2">23. OFFICE CODING</td> <td colspan="2">24. STATION CODE</td> <td colspan="2">25. IN/EGREE CODE</td> <td colspan="2">26. MGR/IN CODE</td> <td colspan="2">27. DATE OF BIRTH</td> <td colspan="2">28. DATE OF GRADE</td> <td colspan="2">29. DATE OF LEI</td> </tr> <tr> <td colspan="2">37</td> <td colspan="2">10</td> <td colspan="2">64700 WH</td> <td colspan="2">45075</td> <td colspan="2">3</td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="3">30. NTE EXPIRES</td> <td colspan="3">31. SPECIAL REFERENCE</td> <td colspan="3">32. RETIREMENT DATA</td> <td colspan="3">33. SEPARATION DATA CODE</td> <td colspan="3">34. CORRECTION/CANCELLATION DATA</td> <td colspan="2">35. SECURITY REQ NO.</td> <td colspan="1">36. SEX</td> </tr> <tr> <td colspan="3">EOD DATA</td> <td colspan="3"></td> <td colspan="3"></td> <td colspan="3"></td> <td colspan="2"></td> <td colspan="1"></td> </tr> <tr> <td colspan="2">37. VET. PREFERENCE</td> <td colspan="3">38. SERV. COMP. DATE</td> <td colspan="3">39. LONG COMP. DATE</td> <td colspan="2">40. CAREER CATEGORY</td> <td colspan="3">41. FEGLI / HEALTH INSURANCE</td> <td colspan="3">42. SOCIAL SECURITY NO.</td> </tr> <tr> <td colspan="2">CODE</td> <td colspan="3">NO DA YR</td> <td colspan="3">NO DA YR</td> <td colspan="2">CODE</td> <td colspan="3">CODE</td> <td colspan="3">CODE</td> </tr> <tr> <td colspan="2">43. PREVIOUS GOVERNMENT SERVICE DATA</td> <td colspan="3">44. LEAVE CAT</td> <td colspan="3">45. FEDERAL TAX DATA</td> <td colspan="3">46. STATE TAX DATA</td> </tr> <tr> <td colspan="2">CODE</td> <td colspan="3">CODE</td> <td colspan="3">CODE</td> <td colspan="3">CODE</td> <td colspan="3">CODE</td> </tr> </table>										21. ACTION CODE		22. EMPLOY. CODE		23. OFFICE CODING		24. STATION CODE		25. IN/EGREE CODE		26. MGR/IN CODE		27. DATE OF BIRTH		28. DATE OF GRADE		29. DATE OF LEI		37		10		64700 WH		45075		3										30. NTE EXPIRES			31. SPECIAL REFERENCE			32. RETIREMENT DATA			33. SEPARATION DATA CODE			34. CORRECTION/CANCELLATION DATA			35. SECURITY REQ NO.		36. SEX	EOD DATA															37. VET. PREFERENCE		38. SERV. COMP. DATE			39. LONG COMP. DATE			40. CAREER CATEGORY		41. FEGLI / HEALTH INSURANCE			42. SOCIAL SECURITY NO.			CODE		NO DA YR			NO DA YR			CODE		CODE			CODE			43. PREVIOUS GOVERNMENT SERVICE DATA		44. LEAVE CAT			45. FEDERAL TAX DATA			46. STATE TAX DATA			CODE		CODE			CODE			CODE			CODE		
21. ACTION CODE		22. EMPLOY. CODE		23. OFFICE CODING		24. STATION CODE		25. IN/EGREE CODE		26. MGR/IN CODE		27. DATE OF BIRTH		28. DATE OF GRADE		29. DATE OF LEI																																																																																																																							
37		10		64700 WH		45075		3																																																																																																																															
30. NTE EXPIRES			31. SPECIAL REFERENCE			32. RETIREMENT DATA			33. SEPARATION DATA CODE			34. CORRECTION/CANCELLATION DATA			35. SECURITY REQ NO.		36. SEX																																																																																																																						
EOD DATA																																																																																																																																							
37. VET. PREFERENCE		38. SERV. COMP. DATE			39. LONG COMP. DATE			40. CAREER CATEGORY		41. FEGLI / HEALTH INSURANCE			42. SOCIAL SECURITY NO.																																																																																																																										
CODE		NO DA YR			NO DA YR			CODE		CODE			CODE																																																																																																																										
43. PREVIOUS GOVERNMENT SERVICE DATA		44. LEAVE CAT			45. FEDERAL TAX DATA			46. STATE TAX DATA																																																																																																																															
CODE		CODE			CODE			CODE			CODE																																																																																																																												
SIGNATURES OF OTHER AUTHENTICATION																																																																																																																																							
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>POSTED</p> <p>08/02/63 [Signature]</p> </div>																																																																																																																																							

A. Fitness Reports covering period 1/1/68  
to 12/31/68 Assignment

B. Personnel Actions for period prior  
to 1/1/68 Assignment

SECRET

(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER
<b>SECTION A GENERAL</b>						
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
[REDACTED]			M	GS-12	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer			DDP/WH/1			
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE			
<input type="checkbox"/> SPECIAL (Specify)			<input type="checkbox"/> SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From To)			
December 1964			1 Jan 1964 - 22 November 1964			
<b>SECTION B PERFORMANCE EVALUATION</b>						
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>						
<b>SPECIFIC DUTIES</b>						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).						
SPECIFIC DUTY NO. 1					RATING LETTER	
Case Officer for Soviet access agents.					P	
SPECIFIC DUTY NO. 2					RATING LETTER	
Analyst work, preparing Soviet personality reports. ✓					S	
SPECIFIC DUTY NO. 3					RATING LETTER	
Transcription into English of Russian technical product, and preparation of interpretative renditions of same when necessary.					O	
SPECIFIC DUTY NO. 4					RATING LETTER	
SPECIFIC DUTY NO. 5					RATING LETTER	
SPECIFIC DUTY NO. 6					RATING LETTER	
<div style="border: 1px solid black; padding: 5px; display: inline-block;">             POSTED ON              7 JAN 1965  <i>[Signature]</i> </div>						
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					RATING LETTER	
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S	
7 JAN 1965					✓	

**SECRET**  
(When Filled In)

<b>SECTION C</b>		<b>NARRATIVE COMMENTS</b>	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Manner of performance of managerial or supervisory duties must be described, if applicable.</u> As explained in the previous fitness report, Subject was assigned to the Station for the purpose of taking charge of the Station's joint telephone tap center, a position for which he was and is eminently qualified by reason of extensive experience and outstanding language qualifications. However, this position did not materialize because of circumstances beyond the control of Subject and the Station.</p> <p>It was therefore subsequently decided to train Subject locally, and have him gradually assume case officer and analyst responsibilities in certain simpler aspects of the Station's Soviet program.</p> <p>Given the circumstances that Subject had not had prior case officer or analytical experience (or even any substantial past exposure to operations to give him vicarious experience) he progressed more than adequately in absorbing the training offered, in assuming responsibility for two Soviet operations and in the preparation of analytical studies on the Soviet complement. Given the further circumstances that the Station did not have the time to train him more than superficially, and that the operations he handled were basically uncomplicated, it must be stated that Subject cannot now be considered to be a case officer.</p> <p>This conscientious and intelligent officer has high interest and enthusiasm for operations, but it is believed that his forte and future lies in the management of technical operations. This has been recognized also by Headquarters in the assignment presently planned for him.</p> <p>As a staff agent [redacted] he and his family adapted themselves remarkably well to the [redacted] situation and to all other environmental factors.</p>			
<b>SECTION D</b>		<b>CERTIFICATION AND COMMENTS</b>	
<b>1. BY EMPLOYEE</b>			
<b>I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT</b>			
DATE	SIGNATURE OF EMPLOYEE		
23 November 1964	[redacted]		
<b>2. BY SUPERVISOR</b>			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
23 November 1964	Ops Officer	[redacted]	
<b>3. BY REVIEWING OFFICIAL</b>			
<b>COMMENTS OF REVIEWING OFFICIAL</b>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
23 November 1964	COS	[redacted] / Winston K. Scott	

**SECRET**

**SECRET**  
(When Filled In)

98

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
<b>SECTION A</b>				<b>GENERAL</b>			
1. NAME <i>(Last) (First) (Middle)</i> ██████████			2. DATE OF BIRTH 6 Jan 1912	3. SEX M	4. GRADE GS-12	5. SD D	
6. OFFICIAL POSITION TITLE Operations Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP WH		8. CURRENT STATION		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL		<input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P. 28 February 1964			12. REPORTING PERIOD (From - to) 6 August 1963 - 31 December 1963				
<b>SECTION B</b>				<b>PERFORMANCE EVALUATION</b>			
<p><b>W - <del>Weak</del></b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - <del>Adequate</del></b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - <del>Proficient</del></b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - <del>Strong</del></b> Performance is characterized by exceptional proficiency.</p> <p><b>O - <del>Outstanding</del></b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Translation of Russian and Spanish materials.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
SPECIFIC DUTY NO. 3						RATING LETTER	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and pertinent limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
14 FEB 1964						S	

POSTED ON  
17 Feb 64



SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

IF FILL OF OFFICER

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Feb 13 1 26 PM '64

From the time of Subject's arrival in Mexico and through all December 1963, he was utilized principally in translation work and was held on tap for the position of heading up the Station's joint telephone tap center. Circumstances beyond the control of the Station and Subject are responsible for the fact that the incumbent in charge of the center will continue these duties and Subject will be given other responsibilities.

Primarily, Subject will be trained to handle analyst and case officer responsibilities in the Soviet field. The level and range of the responsibilities will depend on the progress Subject makes in handling these duties in a manner satisfactory to the Station.

Subject is most conscientious and effective in every assignment given him to date, and the Station is extremely pleased to have him available as an outside Station asset. He is enthusiastic about all his work, including certain part-time routine and arduous duties, and he looks forward with confidence to the prospect of becoming a case officer. Although it is premature to state positively that Subject will succeed as a case officer, the supervisor believes that Subject will undoubtedly progress adequately.

Subject and his family have acclimated themselves excellently to the [redacted] situation, faster than most of the Station's other staff agents, and certainly with fewer problems and requests for guidance from the Station's staff.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 29 January 1964	SIGNATURE OF EMPLOYEE [Redacted Signature]	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 29 January 1964	OFFICIAL TITLE OF SUPERVISOR Operations Officer	TYPED OR PRINTED NAME AND SIGNATURE /s/ [Redacted]
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE 29 January 1964	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief of Station	TYPED OR PRINTED NAME AND SIGNATURE /s/ [Redacted]

SECRET

Pre 1961 Fitness Reports  
and other personnel  
documents