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**INTAKE FORM FOR EMPLOYMENT LAW ADVICE MATTERS**

Employment & Labor Law Unit, Eastern Region  
Office of the Solicitor

Date Submitted:

Employee's First & Last Name (or Union & Local):

Bureau (i.e., NPS Northeast Region):

Bureau HR/LR Contact Person (name & phone):

Advice Issue (please check the applicable matter from the list below):

- |   |   |
|---|---|
| <input type="checkbox"/> Directed Reassignment        | <input type="checkbox"/> Performance (EPAP; PIP)      |
| <input type="checkbox"/> Informal EEO                 | <input type="checkbox"/> Proposed Removal             |
| <input type="checkbox"/> Labor (grievance, ULP, etc.) | <input type="checkbox"/> Proposed Suspension          |
| <input type="checkbox"/> Letter of Counseling         | <input type="checkbox"/> Reasonable Accommodation     |
| <input type="checkbox"/> Letter of Reprimand          | <input type="checkbox"/> RIF                          |
| <input type="checkbox"/> OSC Investigation            | <input type="checkbox"/> Termination During Probation |
| <input type="checkbox"/> Policy Review                | <input type="checkbox"/> Suitability                  |
| <input type="checkbox"/> Other (provide issue)        |   |

Relevant Management Contacts (name & phone):

Employee/Union Location:

Brief Summary of Issue (*Attach all relevant documents. If sent electronically, redact PII or send encrypted. If over 25 pages, please also provide in hard copy.*):

Does this issue involve any special circumstances? (*threat/safety issue; employee is on or will be on administrative leave; deadline driven, such as reasonable accommodation, etc.*) If so, explain:

Please name which attorney already has knowledge of this matter or employee: