

# KN ORIENTATION & JOB INDUCTION CHECKLIST

신규 한인직원 업무 및 규정에 대한 교육표  
(EUSA REG 690-5)

TO: _____ CIVILIAN PERSONNEL ADVISORY CENTER APO AP	FROM: _____
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EMPLOYEE'S NAME 직원성명	JOB TITLE & GRADE 직책 및 급수	ORGANIZATION 소속 부대
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## SECTION I - GENERAL ORIENTATION (Conducted by CPAC)

1. MISSION OF USFK 2. EMPLOYMENT PROCESS a. SF 50, NOTIFICATION OF PERSONNEL ACTION b. EMPLOYMENT STATUS c. OFFICIAL PERSONNEL FOLDER 3. JOB CLASSIFICATION & COMPENSATION a. GRADES (KGS AND KWB) b. PAY RATE LOCALITY WAGE SURVEY c. ALLOWANCE (PIK, CAP, BA, OP) d. POSITION CLASSIFICATION SURVEY e. STEP INCREASE f. BONUSES g. TOUR OF DUTY h. OVERTIME RATE i. NIGHT DIFFERENTIAL j. HOLIDAY PAY k. PAY DAY l. SEVERANCE PAY m. EMERGENCY ESSENTIAL POSITIONS n. INJURY COMPENSATION 4. ALLOWANCES & OTHER BENEFITS a. RELOCATION ALLOWANCE b. REMOTE AREA ALLOWANCE c. TUITION ASSISTANCE - DEPENDENT STUDENTS d. MEDICAL INSURANCE PLAN e. CHEST X-RAY f. NATIONAL PENSION PLAN g. CONDOLENCE PAYMENT h. UNIFORM ALLOWANCE i. SUPERVISORY DIFFERENTIAL PAYMENT 5. LEAVE AND HOLIDAYS a. ANNUAL LEAVE b. SICK LEAVE c. MATERNITY LEAVE d. LWOP AND AWOL	e. HOLIDAYS AND HOLIDAY WORK f. PAID DAY OFF ON FAMILY EVENTS 6. PERSONNEL ACTION a. PROMOTION b. REASSIGNMENT c. DETAIL d. CHANGE TO LOWER GRADE e. FURLOUGH f. RESIGNATION g. SEPARATION h. REDUCTION IN FORCE i. RETIREMENT/REAPPOINTMENT BEYOND AGE 60 j. REMOVAL 7. DISCIPLINE, GRIEVANCE AND APPEAL a. TYPE OF ACTIONS & PROCEDURES b. TABLE OF STANDARD PENALTIES c. GRIEVANCE & APPEAL PROCEDURE 8. PERFORMANCE APPRAISAL a. ANNUAL PERFORMANCE APPRAISAL b. TRIAL PERIOD APPRAISAL 9. INCENTIVE AWARDS a. SUGGESTION PROGRAM b. SSPA'S AND OPR'S c. OTHER MONETARY AND HONORARY AWARDS 10. TRAINING PROGRAM a. ON-THE-JOB TRAINING b. OFF-THE-JOB TRAINING c. FORMAL ON-SITE TRAINING d. TUITION ASSISTANCE PROGRAM e. OUT-OF-THE COUNTRY RESIDENT TRAINING f. ARMY CORRESPONDENCE PROGRAM 11. UNION AND UNION MEMBERSHIP 12. ID CARD AND SECURITY CLEARANCE 13. QUESTIONS
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SECTION I ORIENTATION GIVEN BY : \_\_\_\_\_ HOURS UTILIZED : \_\_\_\_\_  
(SIGNATURE)

### CERTIFICATE 서약

I, THE UNDERSIGNED, HAVE RECEIVED THE ORIENTATION AS OUTLINED ABOVE. I CERTIFY THAT I UNDERSTAND AND WILL COMPLY WITH THE INSTRUCTIONS REGARDING MY EMPLOYMENT.

본인은 상기한 사항에 대한 예비교육을 받았으며 상기 지침사항을 충분히 이해하였으며 또한 이를 행라할 것을 서약 함.

DATE 일자	SIGNATURE OF EMPLOYEE 직원의 서명
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**SECTION II - JOB INDUCTION (Conducted by immediate supervisor)**

**INSTRUCTIONS TO THE IMMEDIATE SUPERVISOR:** Please explain to the new employee pertinent information concerning the following items and any other local "ground rules" with which he should be familiar. Upon completion of this interview have employee sign this form and return to your Civilian Personnel Advisory Center for inclusion in the Official Personnel Folder.

직접 감독자에 대한 설명 사항: 새로 직원에게 아래와 같은 사항과 그가 알아 두어야 할 기타 규칙에 대하여 설명하여 주십시오. 이 업무교육이 끝나면 직원의 설명을 이 양식의 아래란에 받고 방한인 인사처로 보내주시기 바랍니다. 이 업무교육은 직원의 인사기록에 들어가게 됩니다.

1. **OUTLINE UNIT'S ORGANIZATION AND MISSION.** 부대 조직과 업무.

2. **EXPLAIN POLICY AND PROCEDURES ON:** 다음과 같은 사항에 대한 방침과 절차를 설명하십시오.

- |                                    |   |                                      |
|------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> DUTY 근무시간 | <input type="checkbox"/> ABSENTEEISM 결근           | <input type="checkbox"/> SECURITY 보안 |
| <input type="checkbox"/> LEAVE 휴가  | <input type="checkbox"/> LUNCH & REST PERIOD 점심시간 | <input type="checkbox"/> SAFETY 안전   |

3. **REVIEW AND DISCUSS:** 다음과 같은 것을 설명하십시오.

- |  |   |
|--|---|
| <input type="checkbox"/> PERFORMANCE REQUIREMENTS 업무수행 필수 사항 | <input type="checkbox"/> TRIAL PERIOD APPRAISAL 시용기간 평가 |
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4. **BRIEFLY REVIEW EMPLOYEE'S BACKGROUND (Previous experience, hobbies, etc.)** 직원의 배경에 대하여 간단히 검토하십시오. (성명, 취미 등).

5. **INTRODUCE EMPLOYEE TO FELLOW EMPLOYEES, SUPERVISORS AND OFFICIALS.**

신규 직원을 동료 직원들과 감독자들 그리고 기타 관계자들에게 소개하십시오.

6. **FAMILIARIZE EMPLOYEE WITH WORK AREA.** 직원에게 그의 작업장에 대하여 익숙해지게 하십시오.

7. **EXPLAIN ISSUE AND RESPONSIBILITY ON:** 다음과 같은 보급에 대하여 설명하고 그에 대한 책임을 강조하십시오.

- |  |  |
|--|--|
| <input type="checkbox"/> ADMINISTRATIVE SUPPLIES 행정 보급 | <input type="checkbox"/> EQUIPMENT AND/OR TOOLS 장비와 도구 |
|--|--|

8. **BRIEF EMPLOYEE ON LOCATION OF:** 다음과 같은 것의 위치를 설명하십시오.

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> SIGN IN SHEET 출근부                 | <input type="checkbox"/> BULLETIN BOARD 게시판 | <input type="checkbox"/> DISPENSARY 병위 |
| <input type="checkbox"/> LUNCH & REST ROOM 식당 및 휴게실 혹은 화장실 |   |  |

9. **OTHER LOCAL RULES AND REGULATIONS:** 기타의 현지 규칙이나 규정을 설명하십시오.

- a.  SAEDA BRIEFING 보안안 및 방첩교육      b.       c.

SIGNATURE OF PERSON CONDUCTING ORIENTATION AT UNIT			HOURS UTILIZED
NAME 감독자 성명	TITLE 직명	PHONE NO. 전화번호	

I HAVE BEEN ORIENTED AS OUTLINED ABOVE.  
본인은 위와 같은 업무 교육을 받았습니다.

DATE 일자	SIGNATURE OF EMPLOYEE 직원의 서명