



Agency Designee and Contact Form

Agency Name: _____

Personnel Designee with Signature Authority

The following employee is authorized to act as my designee on behalf of the agency with regards to personnel actions that I, as the agency head, am not required to execute by law or policy:

Designee: _____

Title: _____ Email: _____

Designee Signature: _____

Employees with Authority to Discuss Personnel Actions with MSPB

The following employee(s) is/are authorized to discuss personnel matters with MSPB staff via telephone and/or email and need to be **added** to our list (if different than the designee listed above):

The following employee(s) are no longer authorized to discuss personnel matters with MSPB staff and need to be **removed** from our list:

If the designees above should be included on MSPB's email newsletter distribution list, please include their email addresses here:

**Please note that personnel matters will not be discussed with any employee who has not been authorized by his or her agency head. It is the agency's responsibility to notify MSPB of the resignation or retirement of any designee or contact.*

Training Contact

The following employee(s) are the primary contact(s) for the MSPB Office of Training and Development to discuss employees' status, program completion, etc. (This may be the HR director or another HR staff member):

Training Contact: _____ Telephone: _____

Title: _____ Email: _____

Agency Head Name: _____

Agency Head Signature: _____ Date: _____

Please email your completed form to MSPB.communications@mspb.ms.gov