

Training Request / Approval for  
**Reimbursable Upgrade Training Program**

Name: \_\_\_\_\_ Permanent Rate: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Request upgrade to the following License/Document/Endorsement:** (Check one)

- Chief Mate of ocean steam or motor vessels any gross tons
- Second Mate of ocean steam or motor vessels any gross tons
- Third Mate of ocean steam or motor vessels any gross tons
- Chief Engineer of steam and/or motor vessels unlimited horsepower
- First Assistant Engineer of steam and/or motor vessels unlimited horsepower
- Second Assistant Engineer of steam and/or motor vessels unlimited horsepower
- Third Assistant Engineer of steam and/or motor vessels unlimited horsepower
- Qualified Member of the Engine Department
- Other \_\_\_\_\_

MSC USE ONLY

- Approved                      Valid until: \_\_\_\_\_
- Disapproved                      Mariner provided copy: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**MSC 12410/2 (Rev 3/20)**

Enclosure (1)

## MSC TRAINING INFORMATION BULLETIN

### Reimbursable Upgrade Training Program Bulletin

#### **Military Sealift Command Continued Service Agreement**

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Trainee's Full Name: \_\_\_\_\_ Permanent Rate: \_\_\_\_\_  
(Print or Type)

This continued service agreement applies to individuals employed by Military Sealift Command (MSC) who participate in the Reimbursable Upgrade Training Program.

1. I AGREE that, upon completion of the MSC Reimbursable Upgrade Training Program, I will serve in the Department of Defense (DOD) for a period of three years. My continued service obligation will commence on the first day of work after completion of this program.
2. I UNDERSTAND that I must meet all program requirements as specified by MSC. Further, I AGREE that if I should fail to successfully complete the subject program due to circumstances within my control (e.g., misconduct, personal delinquency), I will reimburse MSC for all training costs (excluding salary) of tuition, fees, books, materials, equipment, indirect training costs and travel related expenses (i.e., per diem, mileage reimbursement, etc.) paid in connection with my attendance in the subject program.
3. I AGREE that, if I voluntarily separate from Federal Service before completing the period of service agreed to in this agreement, I will reimburse MSC for all training costs (excluding salary) of tuition, fees, books, materials, equipment, indirect training costs and travel related expenses (e.g., per diem, mileage reimbursement, etc.) paid in connection with my attendance in the subject program. However, the amount of the reimbursement will be reduced on a pro rata basis for the percentage of completion of the obligated service. For example, if the cost of training was \$15,000.00 and I completed two-thirds of the obligated service, I will reimburse MSC \$5,000.00 vice the original \$15,000.00.
4. I AGREE that if I voluntarily leave DoD to enter another Federal agency or other organization in any branch of the Federal Government before completing the period of service agreed to in this Agreement, I will give MSC N1 at least thirty working days advance written notice before the effective date of entrance into the service of the other agency. If I fail to give this advance notice, I AGREE to reimbursement of the training cost as described above.
5. I UNDERSTAND that, during the notice period, MSC will decide whether to require reimbursement of the training costs or to transfer the remaining service obligation to the gaining agency. MSC will notify me of the determination before the end of the notice period.

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Reimbursable Upgrade Training Program Bulletin

6. I UNDERSTAND that this Agreement may be terminated at MSC's election if I fail to fulfill this Agreement for sufficient reasons (e.g., disability retirement).

7. I UNDERSTAND that any amounts, which are due to MSC as a result of any failure on my part to meet the terms of this Agreement, may be withheld from any monies owed me by the Government, or may be recovered by such other methods as are approved by law.

8. I UNDERSTAND the following are the procedures employees must follow in order to obtain a reconsideration of recovery amount over to seek a waiver of the agency's right to recover:

a. MSC will notify me, in writing, of the amount MSC intends to recover;

b. Upon notification, I have 14 calendar days to provide United States Fleet Forces Command (USFFC) my request to reconsider the recovery amount or my appeal for a waiver of MSC's right to recover;

c. I am advised to state the ground on which I believe the determination to reconsider, or waive recovery rights, should be based;

d. USFFC will issue the final Department of the Navy (DON) decision and notify me of that decision.

9. I acknowledge that this Agreement does not in any way commit MSC to continue my employment.

10. I AFFIRM that I am not receiving contributions, awards, or payments in connection with this training, from other government agencies or non-governmental organizations, and I shall not accept such without first obtaining approved from MSC N1.

By signing this Agreement, I AGREE to my compensatory obligations for training to DOD and the Federal Government.

\_\_\_\_\_  
Trainee's Signature

\_\_\_\_\_  
Date

Period of obligated Service: Three years beginning at the completion of the training program

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**EMPLOYEE TRAINING AGREEMENT**  
**Reimbursable Upgrades**

**Note:** *Nominees participating in government-sponsored training that exceeds 80 hours (or such other designated period as prescribed by the agency) must sign an Employee Agreement to Continue in Service Agreement.*

1. I understand that the terms and limitations of this agreement are:
  - a. I will attend the upgrade course of my choice (once pre-approved) and pay all costs myself,
  - b. I must accomplish this training, testing and issuance of the license or document within two (2) years from the date of the approval letter,
  - c. Once training is started and it is apparent it will continue over the two (2) year mark established in item 1.b. above, I will request an extension from the Maritime Training Administration (N1611) to remain in the program (may or may not be approved),
  - d. I must apply for reimbursement to the Maritime Training Administration (N1611) within three (3) months of the license or document issue date,
  - e. Reimbursement will cover the reasonable cost of tuition and registration fees; and books to a maximum amount of \$500
  - f. I must apply for reimbursement to the Maritime Training Administration (N1611) for fees associated with obtaining the license, document or endorsement, per MSCINST 7200.1(if applicable).
2. I agree to continue in service for the period specified on Enclosure 2 – Continued Service Agreement Form, following my request for reimbursement by the Government.
3. If I voluntarily leave the agency before completing the term noted in Enclosure 2 Item 2, I agree to reimburse MSC for all tuition associated with my training.
4. I further agree, if I voluntarily leave MSC to enter the service of another Federal agency or other branch of the Government prior to completing the period of service agreed to in Item 2 above, I will give MSC written notice of at least fourteen (14) work days. A determination concerning reimbursement will be made during the latter time frame. If I fail to give advance notice, I agree to pay the amount of additional expenses (5 U.S.C. 4109(a) (2)) incurred by the Government.
5. If I fail to meet terms of this agreement, any amount due the government may be withheld from monies owed me by the Government, or may be recovered by other legal means.
6. I acknowledge this agreement does not, in any way, commit the Government to continue my employment nor does my successful completion and attainment of the license or document guarantee promotion within MSC. I understand if there is a transfer of my service obligation to another Federal agency (or any other government agency), obligations incurred under this agreement are valid until I complete the one-year continuous service contract with the other agency or organization.
7. I am not receiving any contributions, awards or payments in connection with this training from any other government agency or non-government organization. In addition, I will not accept such without obtaining approval from the CIVMAR Workforce Development Division Head.

\_\_\_\_\_  
Employee Name (Printed)

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date Signed