

STANDARD FORM 64
October 1960
PREPARED BY U. S. CIVIL SERVICE COM.
Federal Personnel Manual
66-102

SECRET

Official Personnel Folder

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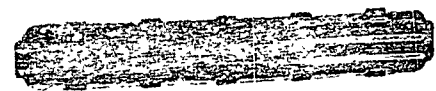
(M)

69 Fil cuts

29 SEP 1969

ACD'S JAMES S
502-16-6500

SEP 20 1969



SECRET
(When Filled In)

08 AUG 1978

REQUEST FOR PERSONNEL ACTION				DATE PREPARED			
1. SERIAL NUMBER 01C032				2. NAME (Last-First-Middle) WOODS JAMES S			
3. NATURE OF PERSONNEL ACTION RETIREMENT - (VOLUNTARY) CIARDS			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 04 78		5. CATEGORY OF EMPLOYMENT REGULAR		
6. FUNDS V TO V C TO V		7. FAR AND NSCA 8026-3430 0000		8. LEGAL AUTHORITY (Completed by Office of Personnel) OL BY LMS Section 33			
9. ORGANIZATIONAL DESIGNATIONS DBO/IMS AND INFORMATION MGMT & PLANNING GROUP RECORDS MANAGEMENT BRANCH AREAS UNIT				10. LOCATION OF OFFICIAL STATION WASH., D.C.			
11. POSITION TITLE RECORDS ADMIN OFF-NE (13)			12. POSITION NUMBER CG45		13. CAREER SERVICE DESIGNATION DCC		
14. CLASSIFICATION SCHEDULE (GS, LB, IN) GS		15. OCCUPATIONAL SERIES 0344-01		16. GRADE AND STEP 13 2		17. SALARY OR RATE \$26,889	
18. REMARKS Last Working Day: 4 August 1978 CONCUR: <i>[Signature]</i> Date <i>7/26/78</i> <i>CNS/MSB</i> <i>co-ordinated with: Ferrel, ROB 7/31/78</i> <i>Geoffrey [Signature]</i>							
18A. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i> Henry E. Walton			DATE SIGNED 7/26/78		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>		DATE SIGNED 7/26/78
C/PCS/CSS/Pers SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL CNS							
19. ACTION CODE 45	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE	23. INTEGREE CODE	24. EDOTYS CODE 1	25. DATE OF BIRTH MO DA YR 03 20 1938
26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR	28. NTE EMPLOY MO DA YR	29. SPECIAL REFERENCE 1-CSC 2-OPGM 3-FICA 4-HQSA	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	33. SECURITY REQ. NO.
34. SEX	35. VET PREFERENCE CODE 0-NO PREFERENCE 1-5 PT 2-10 PT	36. SERV COMP DATE MO DA YR	37. LONG CORP DATE MO DA YR	38. CAREER CATEGORY CODE CAR/RES PROV/EMP	39. FEGLI/HEALTH INSURANCE CODE 0-WAIVER 1-REG 2-REG/OPT 3-UNELIGIBLE	40. SOCIAL SECURITY NO.	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)			42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO		44. STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO	
45. POSITION CONTROL CERTIFICATION <i>[Signature]</i> 7/26				46. OFF. APPROVAL <i>[Signature]</i>		DATE APPROVED 8/1/78	

FORM 1152 USE PREVIOUS EDITION
8-72

SECRET

E-2, IMPDET CL. BY. 007622 (4)

25 July 1978

SUMMARY OF AGENCY EMPLOYMENT

I entered on duty with the CIA in April 1952 and have been in records management for my whole career, seventeen years of it overseas.

James Woods
James B. Woods

NO SECURITY RELECTIONS
[Signature]

10-12-25 7/10/78

SECRET
(When Filled In)

16 MAY 1978

OCF REQUEST FOR PERSONNEL ACTION		DATE PREPARED 9 May 1978	
1. SERIAL NUMBER 010032		2. NAME (Last-First-Middle) WOODS JAMES S	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE REQUESTED MONTH: 04 DAY: 09 YEAR: 78	
5. FUNDS		6. CATEGORY OF EMPLOYMENT REGULAR	
7. ORGANIZATIONAL DESIGNATIONS DDO/IMS INFORMATION, MGMT AND PLANNING GROUP RECORDS MANAGEMENT BRANCH AREAS UNIT		8. LEGAL AUTHORITY (Completed by Office of Personnel) 8026-3430-0000	
9. POSITION TITLE RECORDS ADMIN OFF (13)		10. LOCATION OF OFFICIAL STATION NASH., D.C.	
11. CLASSIFICATION SYMBOL (A.S. L.S. P.S.) GS		12. POSITION NUMBER CG45	
13. OCCUPATIONAL SERIES 0344.01		14. GRADE AND STEP 15 2	
15. SALARY OR RATE \$26,889		16. CAREER SERVICE DESIGNATION DCC	
17. REMARKS FROM: DDO/NE CONCUR: <u>John Diffley (telecord)</u> C/NE/Pers DATE <i>John Diffley</i> <i>con/NE/Pers 05/12/78</i>			
18A. SIGNATURE OF REQUESTING OFFICIAL <i>Henry E. Walton</i>		DATE SIGNED 5/10/78	
18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>John L. Lee</i>		DATE SIGNED 5/10/78	
C/PCS/CSS/Pers SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL DDO/CMS/07-12			
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC: 53746 ALPHABETIC: IMS	22. STATION CODE 75013
23. INTEGRAL CODE	24. MONTHS CODE	25. DATE OF BIRTH MO: 02 DA: 20 YR: 28	26. DATE OF GRADE MO: DA: YR:
27. DATE OF LEI MO: DA: YR:	28. SITE EXP. DATE MO: DA: YR:	29. SOCIAL REFERENCE	30. RETIREMENT DATA CODE
31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE MO DA YR	33. SECURITY REQ. NO	34. SER
35. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36. SERV COMP DATE MO: DA: YR	37. LONG. COMP DATE MO: DA: YR	38. CAREER CATEGORY CAREERIST: PROT/TEMP
39. FEDERAL HEALTH INSURANCE CODE 0-WAITER 1-REG 2-REG/OPT 3-UNELIGIBLE	40. SOCIAL SECURITY NO	41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NONE IN SERVICE 2-SERVE IN SERVICE (LESS THAN 3 YEARS) 3-SERVE IN SERVICE (MORE THAN 3 YEARS)	42. LEAVE CAT. CODE
43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS	44. STATE TAX DATA FORM EXECUTED CODE AND TAX EXEMP STATE CODE	45. POSITION CONTROL CERTIFICATION 3 U IMPDET 105-12-78 From we	46. APPROVAL <i>Robert 47</i> DATE APPROVED 5/26/78



SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 6 Feb 78	
1 SERIAL NUMBER J10032		2 NAME (Last-First-Middle) WOODS, JAMES S.			
3 NATURE OF PERSONNEL ACTION PROMOTION			4 EFFECTIVE DATE REQUESTED MONTH: 02 DAY: 12 YEAR: 78		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS V TO V C TO V		7 FAR AND NSCA 3033 4800 0000		8 LEGAL AUTHORITY (Complied by Office of Personnel)	
9 ORGANIZATIONAL DESIGNATION DDO/NE DIVISION OFFICE OF THE CHIEF, NE DIVISION PLANS STAFF			10 LOCATION OF OFFICIAL STATION WASH, D.C.		
11 POSITION TITLE RECORDS ADMIN OFF		12 POSITION NUMBER CG45	13 CAREER SERVICE DESIGNATION DCC		
14 CLASSIFICATION SCHEDULE (GT, LB, etc.) GS		15 OCCUPATIONAL SERIES 0344.01	16 GRADE AND STEP 13 # 2	17 SALARY OR RATE 26889	
18 REMARKS CONCUR: Henry Walton (telecoord) <u>6 Feb 78</u> ISS <u>Date</u> <i>From 125</i>					
18A SIGNATURE OF REQUESTING OFFICIAL John F. Miller, CNE/PERS		DATE SIGNED 6 Feb 78	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>		DATE SIGNED 2/18/78
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 22	20 HR/OT CODE 10	21 OFFICE CODING NUMERIC: 46015 ALPHABETIC: NE		22 STATION CODE 75013	23 INTEGRITY CODE
24 MOBILE CODE		25 DATE OF BIRTH MO: 02 DA: 20 YR: 28		26 DATE OF GRADE MO: 03 DA: 12 YR: 78	
27 DATE OF LEI MO: DA: YR:		28 SECURITY REG. NO		29 SEC	
29 LIFE EXPENSES MO: DA: YR:		30 RETIREMENT DATA TYPE: CODE		31 SEPARATION DATA CODE	
32 CORRECTION/CANCELLATION DATA TYPE: MO: DA: YR:		33 SECURITY REG. NO		34 SEC	
35 NET PREFERENCE CODE: 0-0000 1-5 PT 2-15 PT		36 SERV COMP DATE MO: DA: YR:	37 LONG COMP DATE MO: DA: YR:	38 CAREER CATEGORY LAB/RSY, PRG/TURP CODE	
39 FEGLI HEALTH INSURANCE CODE: 0-WAIVER 1-REG 2-REG/OPRT 3-INVALIDABLE		40 SOCIAL SECURITY NO		41 FEDERAL TAX DATA FORM EXECUTED CODE: 1-TES 2-NO	
42 STATE TAX DATA FORM EXECUTED CODE: 1-TES 2-NO		43 FEDERAL TAX DATA CODE: NO. TAX EXEMPTIONS		44 STATE TAX DATA FORM EXECUTED CODE: NO. TAX EXEMPT STATE CODE	
45 POSITION CONTROL CERTIFICATION 3-6-78 A20 06 MAR 1978			46 OP APPROVAL <i>[Signature]</i>		DATE APPROVED 6 MAR 78

FORM 8-72 1152

USE PREVIOUS EDITION

SECRET

E-2, IMPDET CL. BY. 007622 (4)

18 August 1978

Mr. James S. Woods
304 Meadow Hall Dr.
Rockville, MD 20851

Dear Mr. Woods:

We are enclosing the employee copy of your
retirement action (Form 1150) that you requested
04 August 1978.

Sincerely,

AS

Abraham Schwartz
Chief, Control Division

Enclosure: 1 Form

Dist.

Orig. - Adse.

1 - TRB

1 - OPE/WOODS, James S.
OP/TRB/SEAllewelt;sea(18AUG78)

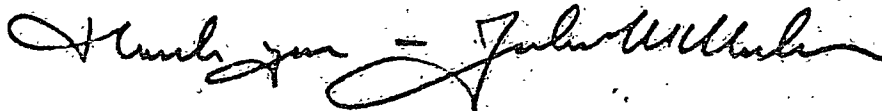
ADMINISTRATIVE-INTERNAL USE ONLY

18 APR 1978

MEMORANDUM FOR: James S. Woods
FROM: John N. McMahon
Deputy Director for Operations
SUBJECT: Commendation for Exceptional Performance

1. The Directorate of Operations Records Review Task Force has finished its work in Warrenton. I want you to know that I realize that a large measure of the success of this effort was due to the exceptional performance of the Records Management Officers who worked long and hard during the six-month period, patiently guiding the 435 Directorate personnel who served on the component teams. Many of you performed additional duties, voluntarily and cheerfully, extending beyond the ten-hour work day, which kept the task force functioning smoothly.

2. This fine team effort and your personal contribution to it is in the best tradition of the Directorate of Operations. I commend you for a job well done.



John N. McMahon

ADMINISTRATIVE-INTERNAL USE ONLY

CONFIDENTIAL

1 AUG 1978

MEMORANDUM FOR: Director of Personnel
FROM : Kenneth Corbat
Chief, Retirement Affairs Division
SUBJECT : Request for Voluntary Retirement -
Mr. James S. Woods

1. This memorandum submits a recommendation for your approval in paragraph 3.

2. The employee named above has applied for voluntary retirement under the provisions of Headquarters Regulation 20-50h.

Grade: GS-13	Position: Records Management Officer
Career Service	Operations
Office/Division	Information Management Staff
Date Requested for Retirement:	4 August 1978
Age at that Date	50
Years of Creditable Service	29
Years of Agency Service	26
Years of Qualifying Service	9

3. The applicant's Career Service and the CIA Retirement Board recommend that the request be approved.

/s/ Kenneth Corbat

The recommendation contained in paragraph 3 is approved.

(Signed) F. W. H. [unclear]

Director of Personnel

2 AUG 1978

Date

Distribution:
0 - Return to ROB
1 - Applicant
1 - OPF
1 - ROB Soft File
1 - ROB Reader

2 AUG 1978

CONFIDENTIAL

010032

11/61

SECRET
(If Not Filled In)

17-00000

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 5 Oct 1977	
1. SERIAL NUMBER 010032		2. NAME (Last-First-Middle) Woods, James S.					
3. NATURE OF PERSONNEL ACTION Reassignment AND CANCELATION of RSEA				4. EFFECTIVE DATE REQUESTED 07 11 77		5. CATEGORY OF EMPLOYMENT Regular	
6. PAY GRADE G10V		7. PAY AND NSCA 0355 4801 0000		8. LEGAL AUTHORITY (Complied by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATION DDO/NE Division Office of the Chief, NE Division Plans Staff				10. LOCATION OF OFFICE & STATION Wash., D. C.			
11. POSITION TITLE Records Admin Off-ene		12. POSITION NUMBER 6645		13. CAREER SERVICE DESIGNATION DCC			
14. CLASSIFICATION SYMBOL (GS, LR, etc.) GS		15. OCCUPATIONAL SERIES 0344.03		16. GRADE AND STEP 12 A		17. SALARY OBJECT 34070	
18. REMARKS replacing Peter Serra Concur: <i>Shirley H. Bennett</i> AC/PCS/SS/Personnel #11 PER Sue 10.17.77 *SAL. BLURB #3 PER NANCY 10.17.77 10/18/77 Date							
18A. SIGNATURE OF REQUESTING OFFICIAL <i>John H. Decker</i> John H. Decker, CMC/DERS				DATE SIGNED 10-05-77		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>J. J. [unclear]</i>	
19. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
20. ACTION CODE 37	21. EMPLOY CODE 10	22. PAY CODES 4603 NS	23. STATION CODE 7504	24. INTEGRITY CODE	25. DATE OF BIRTH 02/20/28	26. DATE OF GRADE	27. DATE OF LR
28. RET. EXP. DATE	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA	FOOD DATA		33. SECURITY
34. SET PREFERENCE	35. SERV. COMP. DATE	36. LOSS COMP. DATE	37. CAREER CATEGORY	38. FEGLI HEALTH INSURANCE	40. SOCIAL SECURITY NO.		
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE			42. LEAVE CAT.	43. FEDERAL TAX DATA		44. STATE TAX DATA	
45. POSITION CONTROL CERTIFICATION 01 NOV 1977			46. OP APPROVAL <i>[Signature]</i>			DATE APPROVED 17 Nov 77	

C-20

SECRET
(When Filled In)

DATE PREPARED
9 August 1976

REQUEST FOR PERSONNEL ACTION

1 SERIAL NUMBER 017732	2 NAME (Last-First-Middle) WOODS, JAMES S.
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3 REASON FOR PERSONNEL ACTION CHANGE OF PAY GRADE	4 EFFECTIVE DATE REQUESTED MO: 08, DA: 09, YR: 76	5 CATEGORY OF EMPLOYMENT ZZZLAR
6 PAY GRADE XX V10V	7 PAY AND NSCA T230 0130 0002	8 OFFICE AUTHORITY (Completed by Office of Personnel)

9 ORGANIZATIONAL DESIGNATIONS DDC/CCS REGISTRY	10 LOCATION OF OFFICIAL STATION WASH., D. C.
------------------------------------------------------	-------------------------------------------------

11 POSITION TITLE REG/DDC ADMIN OFF CH	12 POSITION NUMBER BL 14	13 CAREER SERVICE DESIGNATION fcc
14 CLASSIFICATION SCHEDULE (GS, EP, WS, etc.) GS	15 OCCUPATIONAL SERIES 0344.01	16 GRADE AND STEP 12 4
17 CLASSIFICATION CODE	18 GRADE AND STEP	19 CLASSIFICATION CODE

18 REMARKS

18A SIGNATURE OF REQUESTING OFFICIAL Donald E. McNeill, Admin. Off	DATE SIGNED 9 Aug 76	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER	DATE SIGNED
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 AGENCY CODE 37 10	20 EMPLOY CODE	21 OFFICE CODES NUMERIC ALPHABETIC 39115 CCS	22 STATION CODE 75013	23 INTEGRAL CODE	24 NOTES CODE	25 DATE OF BIRTH MO: 02, DA: 20, YR: 27	26 DATE OF GRAD	27 DATE OF LES
28 RES EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 CORRECTION/LABELLATION DATA	33 SECURITY RIG. NO	34 SEC.	EOD DATA	
35 RES. PREFERENCE	36 SERV COMP DATA	37 LONG COMP DATA	38 CAREER CATEGORY	39 FEEL/HEALTH/INDEMNITY	40 SOCIAL SECURITY NO			
41 FEDERAL CIVILIAN GOVERNMENT SERVICE	42 LEAVE CAT CODE	43 FEDERAL TAX DATA	44 STATE TAX DATA					

45 POSITION CONTROL CERTIFICATION 10 AUG 1976	46 OP APPROVAL B B...	DATE APPROVED
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FORM 1152 USE PREVIOUS EDITION

SECRET

E-Z CHECKED CL BY: 007622

C-NO MEMO
ABS 7/10

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED 13 July 1976	
1. SERIAL NUMBER 010032 ✓		2. NAME (Last-First-Middle) WOODS, JAMES S. ✓									
3. NATURE OF PERSONNEL ACTION Reassignment - Change of Home Base CHANGE OF SERVICE DESIGNATION						4. EFFECTIVE DATE REQUESTED 07 13 76		5. CATEGORY OF EMPLOYMENT REGULAR			
6. PAGES XX		7. V.F.O.V.		8. V.F.O.S.		9. F.P.S. AND H.S.C.A. 0000 0118 0000		10. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDO/CCS REGISTRY						10. LOCATION OF OFFICIAL STATION WASH., D. C.					
11. POSITION TITLE RECORDS ADMIN OF CH (12)						12. POSITION NUMBER RL 1A		13. CAREER SERVICE DESIGNATION DCC			
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS			15. OCCUPATIONAL SERIES 0311.01		16. GRADE AND STEP 12 4		17. SALARY OR RATE \$ 21,324				
18. REMARKS DESIGNATION CHANGED FROM DAC TO DCC. DAC to DCC											
19A. SIGNATURE OF REQUESTING OFFICER Donald E. Mahill, CCS/ADM				DATE SIGNED 13 Jul 76		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED	
19C. SPACE BELOW FOR EXCLUSIVE USE OF THIS OFFICE OF PERSONNEL											
20. ACTION CODE 37 10		21. EMPLOY CODE 37 10		22. OFFICE CODING NUMERIC: CCS ALPHABETIC: 75013		23. STATION CODE 75013		24. EMPLOYEE CODE		25. DATE OF BIRTH 02 20 27	
26. SENIORITY		27. SPECIAL REFERENCE		28. RETIREMENT DATA		29. SEPARATION DATA		30. IDENTIFIED CUMULATION DATA		31. SECURITY REG-NO	
32. NET PREFERENCE		33. NEW COMP DATE		34. LONG COMP DATE		35. CAREER CATEGORY		36. HEALTH INSURANCE		37. SOCIAL SECURITY NO.	
38. PREVIOUS CIVILIAN GOVERNMENT SERVICE				39. STATE CAT		40. FEDERAL TAX DATA		41. STATE TAX DATA		42. SOCIAL SECURITY NO.	
43. POSITION CONTROL CERTIFICATION 20 JUL 1976				44. APPROVAL H. L. T. H. [Signature]				45. DATE APPROVED 07/19/76			

CR

11-22-74

C. M. May (if App. Filled In)

SECRET

<p><i>dCF</i> REQUEST FOR PERSONNEL ACTION</p>						<p>DATE PREPARED 13 November 1974</p>		
<p>1. SERIAL NUMBER 010032 ✓</p>		<p>2. NAME (Last-First-Middle) WOODS, JAMES B. ✓</p>						
<p>3. NATURE OF PERSONNEL ACTION PROMOTION</p>				<p>4. EFFECTIVE DATE REQUESTED 11 24 74</p>		<p>5. CATEGORY OF EMPLOYMENT REGULAR</p>		
<p>6. FUNDS XX <input checked="" type="checkbox"/> V TO V C TO V</p>		<p>V TO O C TO O</p>		<p>7. FAR AND NSCA 5230 0121 0002</p>		<p>8. LEGAL AUTHORITY (Completed by Office of Personnel) 50 USC 403 J</p>		
<p>9. ORGANIZATIONAL DESIGNATION: DDO/CCS CCS/REGISTRY REGISTRY</p>				<p>10. LOCATION OF OFFICE STATION WASH., D. C.</p>				
<p>11. POSITION TITLE RECORDS ADMIN OP-CH (12)</p>			<p>12. POSITION NUMBER 0061</p>		<p>13. CAREER SERVICE DESIGNATION DAC</p>			
<p>14. CLASSIFICATION SCHEME (GS, EA, etc.) CS</p>		<p>15. OCCUPATIONAL SERIES 0344.01</p>		<p>16. GRADE AND STEP 12 3</p>		<p>17. SALARY OF RATE \$ 19,693 ✓</p>		
<p>18. REMARKS CONCUR: MARGARET SOLTY (TELECORD) SS/SE/725</p>								
<p>19A. SIGNATURE OF REQUESTING OFFICIAL <i>Donald E. McMillan</i> Donald E. McMillan CCS/ADP</p>			<p>DATE SIGNED 13 Nov 74</p>		<p>19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i></p>		<p>DATE SIGNED 15 Nov 74</p>	
<p>SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL:</p>								
<p>19 ACTION CODE 22</p>		<p>20 EMPLOY CODE 10</p>		<p>21 OTHER CODING NUMERIC ALPHABETIC 391157 CC3</p>		<p>22 STATION CODE 75613</p>		
<p>23 INTEREST CODE 1</p>		<p>24 DATE OF BIRTH 02 20 28</p>		<p>25 DATE OF GRADE 11 24 74</p>		<p>27 DATE OF SE 11 24 74</p>		
<p>26 NET EMPLOY MO. DA. YR.</p>		<p>29 SYSTEM REFERENCE -CC -OBS -FIC -BOS</p>		<p>31 SEPARATION DATA CODE</p>		<p>37 CORRECTIONS (AMEND FOR EAS) EOD DATA →</p>		
<p>33 VET PREFERENCE CODE 0-None 1-5 YR 2-10 YR</p>		<p>34 SER. COMP. DATE MO. DA. YR.</p>		<p>37 LEAVE COMP. DATE MO. DA. YR.</p>		<p>38 CAREER CATEGORY CODE COOP HEALTH INCURABLE 1-REG 2-PT 3-REG/COOP 4-PT/REG</p>		
<p>41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO SERVICE 1-NO SERVIC IN SERVICE 2-SERVIC IN SERVICE (NOT OVER 3 YEARS) 3-SERVIC IN SERVICE (OVER 3 YEARS)</p>		<p>42 LEAVE CAT CODE</p>		<p>43 FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1-YES 2-NO</p>		<p>44 STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1-YES 2-NO</p>		
<p>45 POSITION CONTROL CERTIFICATION 11-15-74 ✓ JOR 25 NOV 1974</p>				<p>46 O P APPROVAL <i>[Signature]</i></p>		<p>DATE APPROVED <i>[Signature]</i></p>		

27

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED
21 August 1973

4-27

1. SERIAL NUMBER 010032		2. NAME (Last-First-Middle) WOODS, JAMES S.	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND DELEGATION OF N.S.C.A. <i>Transfer to Voucher Funds.</i>		4. EFFECTIVE DATE REQUESTED MONTH: 09 DAY: 16 YEAR: 73	
5. FUNDS XX		6. LEGAL AUTHORITY (Completed by Office of Personnel) 4230 0121 0002	
7. ORGANIZATIONAL DESIGNATIONS DDO/CCS OFFICE OF THE CHIEF RECORDS MANAGEMENT AND REGISTRY SEC		8. LOCATION OF OFFICIAL STATION WASH., D.C.	
9. POSITION TITLE RECORDS ADMIN OF CH		10. POSITION NUMBER 0061	11. CAREER SERVICE DESIGNATION D
12. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	13. OCCUPATIONAL SERIES 0344.01	14. GRADE AND STEP 11 6	15. SALARY OR RATE 16,326
16. REMARKS HOME BASE: 33 40 33 CONCUR FOR CIA W-2: <i>CCS/CCB/S</i> CONCUR: GEORGE OWENS (TELECOORD) C/EUR/PERS CONCUR: WILLIAM H. FLIPPEN (TELECOORD) DDP/RECORDS MGMT OFFICER			
17A. SIGNATURE OF REQUESTING OFFICIAL Erich W. Isenstead, C/CCS		17B. DATE SIGNED 8/24/73	
18A. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		18B. DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE 16	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC: 391001 ALPHABETIC: CCS	22. STATION CODE 15013
23. INTICALE CODE 1	24. HOURS CODE	25. DATE OF BIRTH MO: 02 DA: 20 YR: 28	26. DATE OF GRACE MO: DA: YR:
27. DATE OF LEI. MO: DA: YR:	28. NTE EXPIRES MO: DA: YR: XX/XX/XX	29. SPECIAL REFERENCE	30. RETIREMENT DATA CODE
31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE: MO: DA: YR:	33. SECURITY REQ. NO.	34. SEX
35. VET. PREFERENCE CODE: 0-None, 1-5 Yr, 2-10 Yr	36. SERV. COMP. DATE MO: DA: YR:	37. LONG COMP. DATE MO: DA: YR:	38. CAREER CATEGORY CODE: CAS/RES, PPOB/TEMP
39. FEDERAL TAX DATA FORM EXECUTED: CODE: NO TAX EXEMPTIONS	40. STATE TAX DATA FORM EXECUTED: CODE: NO TAX EXEMPTIONS	41. SOCIAL SECURITY NO.	42. HEALTH INS. CODE
43. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE: 0-NO PREVIOUS SERVICE, 1-NO. PEOPLE IN SERVICE, 2-BEARS IN SERVICE (LESS THAN 3 YEARS), 3-BEARS IN SERVICE (MORE THAN 3 YEARS)	44. LEAVE CAT. CODE	45. FEDERAL TAX DATA FORM EXECUTED: CODE: NO TAX EXEMPTIONS	46. STATE TAX DATA FORM EXECUTED: CODE: NO TAX EXEMPTIONS
47. POSITION CONTROL CERTIFICATION 8-23-B		48. O.P. APPROVAL <i>K. P. Stumpf</i> DATE APPROVED: 25 Aug 73	

4-24

FORM 1-72 1152

USE PREVIOUS EDITION

SECRET CLASSIFIED BY 01-0359

EX-72 APR 68

(4)

CONFIDENTIAL
(When filled in)

NOTE TO PCS RETURNEES

Personnel processing in from a PCS foreign field assignment through Central Processing Branch are required to review the Employee Conduct Handbook and the information for PCS returnees. This information is contained in a notebook provided by the CPB receptionist.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Handbook 20-4, Employee Conduct, dated 9 July 1970 and the information for returnees dated 1 February 1972.

JAMES S WOODS

NAME

(Please Print)

James S Woods

Signature

11 Sept 73

Date

CONFIDENTIAL
(When filled in)

Group 1 - Excluded from
automatic downgrading
and declassification.

SECRET

17 APR 1973

Torrone, Aubrey F.
Taylor, Paul F.
Tilberry, Austin S.
Tilton, John S.
Tronnes, Sue Ann

Certificate of Exceptional
Service (for Vietnam)

Valetich, Steven T.
Vandaveer, Robert J.

Walker, Richard L.
Walsh, Frances M.
Ward, James R.
Ward, Loretta L.
Warren, Gail
Warren, Ward W.
Watson, William Bruce
Weagraff, Ross M.
Whelan, James W.
Whistler, Leonard
White, Walter W.
Whittinghill, Robert B. (no. 2)
Wickham, Ben, Jr.
Wilcox, Rose Marie
Williams, Bruce P.
Williams, Caryl Joyce
Williams, Edward, Jr.
Wilson, Carolyn J.
Wolfe, Mayme E.
Woods, James S.

Yellin, James H.
Young, Robert C.

VIETNAM (Contract Employees)

Allen, Maxwell J.

Bauso, Philip
Baylard, Robert W.
Bias, Louis
Bivens, Edmond
Bolton, William C., Jr.
Boos, Marvin L.
Bowman, David L.
Brown, Robert D.
Buckley, William F.

Chow, Gary Y. C.
Collins, Francis A.

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED		
1. SERIAL NUMBER 010032						2. NAME (Last-First-Middle) WOODS, JAMES S.		
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE REQUESTED MONTH: 02 DAY: 04 YEAR: 73		5. CATEGORY OF EMPLOYMENT REGULAR		
6. PAYES		7. PAY AND NSCA 3136 1267 0000		8. LEGAL AUTHORITY (Completed by Office of Personnel)				
9. ORGANIZATIONAL DESIGNATIONS UDP/EUROPEAN DIVISION FOREIGN FIELD ITALIAN AREA ROME STATION SUPPORT BRANCH				10. LOCATION OF OFFICIAL STATION ROME, ITALY				
11. POSITION TITLE A.D.M. RECORDS ADMIN OFFICER (09)				12. POSITION NUMBER 0699		13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0344 01		16. GRADE AND STEP 11.6		17. SALARY OR RATE \$16326		
18. REMARKS <i>HOME BASE: IS CONCUR <u>William Graham</u> PRA HR 20-17e (1) (a) PROMOTION CONCUR: C/E/ITALY <u>WJ Smid</u> NTE 1/73. Mr. Woods will be assigned to DOP/CO/S/PMU position 00611111. Mr. Eron.</i>								
18A. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i>			DATE SIGNED 1/31/73		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>		DATE SIGNED 2/2/73	
WILLIAM C. COOLEY, C/E/PEPS								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE 33		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC: 44750 ALPHABETIC: EUR		22. STATION CODE 36533		
23. INTEGREE CODE		24. MONTHS CODE 3		25. DATE OF BIRTH MO: 02 DA: 20 YR: 28		26. DATE OF GRADE MO: 02 DA: 04 YR: 73		
27. DATE OF LEI MO: 02 DA: 04 YR: 73		28. WFE EXPRES MO: 02 DA: 03 YR: 74		29. SPECIAL REFERENCE 81		30. RETIREMENT DATA		
31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ. NO.		34. SER.		
35. WFT PREFERENCE CODE: 1-5 FT		36. SERV COMP DATE MO: DA: YR:		37. LONG COMP DATE MO: DA: YR:		38. CAREER CATEGORY LBR/RESP: PROG/TEMP		
39. FEGLI/HEALTH INSURANCE CODE: 1-REG		40. SOCIAL SECURITY NO.		41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE: 3-NO PREVIOUS SERVICE				
42. LEAVE CAT. CODE		43. FEDERAL TAX DATA FORM EXECUTED: 1-YES		44. STATE TAX DATA FORM EXECUTED: 1-YES		45. POSITION CONTROL CERTIFICATION 2-2-73		
46. OP APPROVAL <i>[Signature]</i>		DATE APPROVED 2/2/73		47. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE: 2-ESAL IN SERVICE (LESS THAN 3 YEARS)				
48. FEDERAL TAX DATA NO TAX EXEMPTIONS		49. STATE TAX DATA NO TAX EXEMPTIONS		45. POSITION CONTROL CERTIFICATION 2-2-73				

FORM 1152 USE PREVIOUS EDITION
6-72

SECRET

E-2, IMPDET CL. BY: 007622 (4)

FEB 1973

UNCLASSIFIED
 INTERNAL USE ONLY
 CONFIDENTIAL
 SECRET

ROUTING AND RECORD SHEET

SUBJECT: (Optional)

FROM: JAMES WOODS

EUR/PERS
4B0002 Hqs

TO: (Officer designation, room number, and building)

DATE RECEIVED FORWARDED OFFICER'S INITIALS COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

NO.	TO:	DATE		OFFICER'S INITIALS	COMMENTS
		RECEIVED	FORWARDED		
1.	E/PERS/ TEDDY			JLW	
2.	C/E/PERS			JLW	
3.	C/E/PERS J			J	
4.	E/PERS/ JON		1/31	JON	for concurrence
5.	C/IS/PERS	1 FEB 1973	2 Feb 73	MB	for concurrence
6.					
7.	CSPS/SOB GG10		2/2/73	gan	7. Subject will be assigned as C/Sec + RMO 200/CCS upon his return to Hqs (about Aug 73), vice Ebran MB
8.					
9.					
10.	OP/PI 5E03				Mr. Woods will be assigned to CCS/RMO position 0061 vice Mr. Michael Ebran.
11.					
12.					
13.					
14.					
15.					

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 15 MARCH 1971								
1. SERIAL NUMBER 010032		2. NAME (Last-First-Middle) WOODS JAMES S										
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS			4. EFFECTIVE DATE REQUESTED MONTH: 05 DAY: 30 YEAR: 71		5. CATEGORY OF EMPLOYMENT REGULAR							
6. FUNDS V TO V: <input type="checkbox"/> V TO C: <input checked="" type="checkbox"/> C TO V: <input type="checkbox"/> C TO C: <input type="checkbox"/>		7. FINANCIAL ANALYSIS NO CHARGEABLE 1136-1267		8. LEGAL AUTHORITY (Completed by Office of Personnel)								
9. ORGANIZATIONAL DESIGNATIONS DDP/EUR FOREIGN FIELD ITALIAN AREA ROME STATION SUPPORT BRANCH			10. LOCATION OF OFFICIAL STATION ROME ITALY									
11. POSITION TITLES RECORDS ADM OF (69)			12. POSITION NUMBER 0699		13. CAREER SERVICE DESIGNATION D							
14. CLASSIFICATION SCHEDULE (GS, LB, PK) GS		15. OCCUPATIONAL SERIES 0344.01	16. GRADE AND STEP 10 7	17. SALARY OR RATE \$ 13,821 ✓								
18. REMARKS 1 cc: Payroll From: DDP/EUR DEVELOPMENT COMPLEMENT No Language Required PRA HR 20-17E(1) (B) NTE Two Yrs X HB: EUR												
18A. SIGNATURE OF REQUESTING OFFICIAL <i>Willford C Taylor</i> WILLFORD C TAYLOR, C/E/PCRS		DATE SIGNED 3/15/71	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>C. Beck</i>		DATE SIGNED 3/17/71							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE 20	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC: 4462 ALPHABETIC: SUP		22. STATION CODE 36533	23. INTEGRITY CODE	24. HONORS CODE 3	25. DATE OF BIRTH MO: 02 DA: 20 YR: 28		26. DATE OF GRADE MO: DA: YR:		27. DATE OF LSI MO: DA: YR:	
28. NTE EXPIRES MO: DA: YR: 05/29/73		29. SPECIAL REFERENCE 82	30. RETIREMENT DATA CODE		31. SEPARATION DATA CODE		32. CORRECTION, CANCELLATION DATA TYPE: MO: DA: YR:		33. SECURITY RES. NO.		34. SEX	
35. VET PREFERENCE CODE: 0-NONE, 1-5 PT, 2-10 PT		36. SERV COMP DATE MO: DA: YR:		37. LONG COMP. DATE MO: DA: YR:		38. CAREER CATEGORY CAR. DES. PROV/TEMP: CODE: CODE:		39. FEGLI/HEALTH INSURANCE 0-WAIVED, 1-YES: HEALTH INS. CODE:		40. SOCIAL SECURITY NO.		
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE: 0-NO PREVIOUS SERVICE, 1-NO BREAK IN SERVICE, 2-BREAK IN SERVICE (LESS THAN 3 YEARS), 3-BREAK IN SERVICE (MORE THAN 3 YEARS)			42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED: CODE: MO: TAX CREDITIONS: FORM EXECUTED: CODE: NO. TAX STATE CODE		44. STATE TAX DATA						
45. POSITION CONTROL CERTIFICATION 5-7-71 <i>Will</i>				46. O.P. APPROVAL <i>C. Beck</i>				DATE APPROVED 5-10-71				

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED
02 DECEMBER 1970

1 SERIAL NUMBER 010032		NAME (Last-First-Middle) WOODS JAMES S		4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 12 13 70		5 CATEGORY OF EMPLOYMENT REGULAR	
3 NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS				7 FINANCIAL ANALYSIS NO. CHARGEABLE 1236-1186		8 LEGAL AUTHORITY (Completed by Office of Personnel)	
6 FUNDS XX		V TO V C TO V		V TO C C TO C		9 ORGANIZATIONAL DESIGNATIONS DDP/EUR DEVELOPMENT COMPLEMENT	
11 POSITION TITLE RECORDS ADM OFFICER				10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.		12 POSITION NUMBER 9997	
14 CLASSIFICATION SCHEDULE (GS, L, P, PW)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE	
GS		0344.01		10 7		\$ 13,041	
18 REMARKS 2cc: SECURITY cc: PAYROLL & Other FROM: DDP/EUR/FOREIGN FIELD LONDON, ENGLAND SLOT# 0254 NTE: 30 June 1971 Pending Reassignment. Security Approval Granted by Data on 12/4/70 Paw 12/10/70							
18A SIGNATURE OF REQUESTING OFFICIAL WILFORD C. TAYLOR, C/E/PERS				DATE SIGNED 3 Dec 70		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
19 ACTION CODE 16 18				21 OFFICE CODING NUMERIC ALPHABETIC 44997 GZR		22 STATION CODE 75313	
20 EMPLOY CODE		23 INTEGRITY CODE		24 HOURS CODE		25 DATE OF BIRTH MO. DA. YR. 02 20 28	
26 DATE OF GRADE MO. DA. YR.		27 DATE OF LEF MO. DA. YR.		28 SECURITY REQ. NO.		29 SEX	
30 RETIREMENT DATA 1-ESC 2-OTIS 3-NONE		31 SEPARATION DATA CODE		32 CORRECTION CANCELLATION DATA TYPE MO. DA. YR.		EOD DATA	
35 VET. PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36 SERV COMP DATE MO. DA. YR.		37 LONG COMP. DATE MO. DA. YR.		38 CAREER CATEGORY CAR/BILY PROV/TEMP	
39 FEGLI/HEALTH INSURANCE CODE 0-WAIVER 1-YES		40 SOCIAL SECURITY NO.		41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE CAT. CODE	
43 FEDERAL TAX DATA FORM EXECUTED 1-YES 2-NO		44 STATE TAX DATA FORM EXECUTED 1-YES 2-NO		45 POSITION CONTROL CERTIFICATION 12-8-70 MW		46 OP APPROVAL W heat	
DATE APPROVED 12/8/70							

A
25

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7

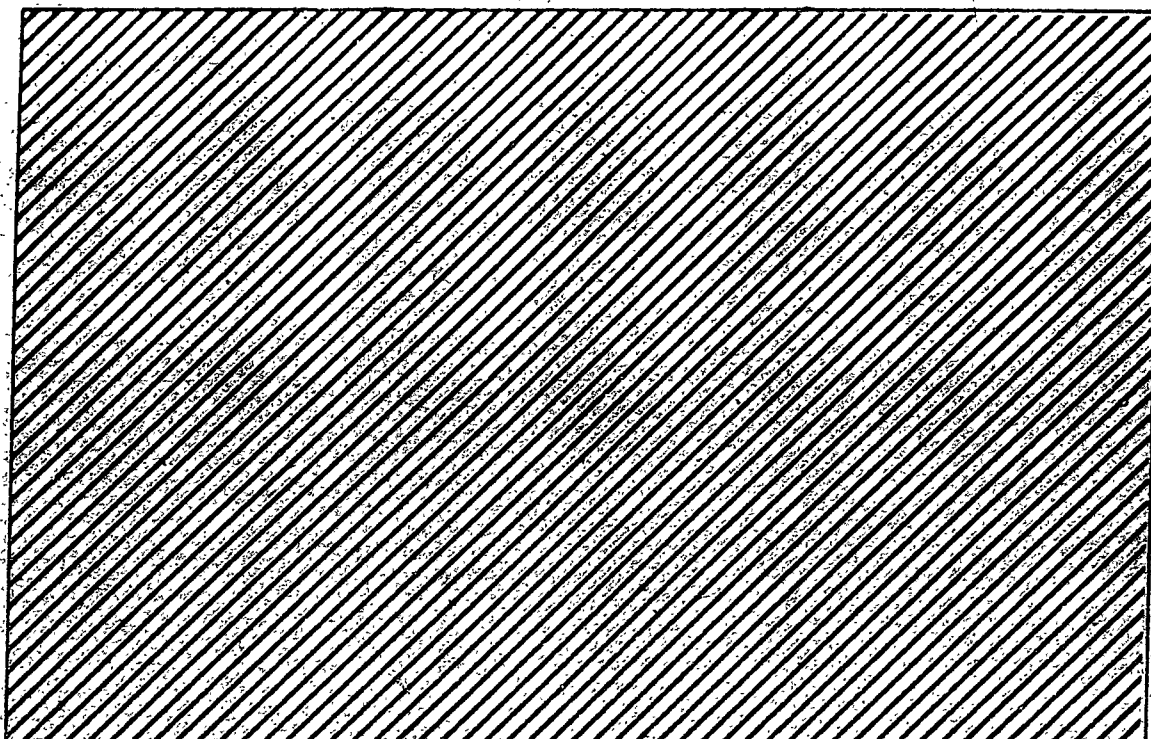
SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 20 JANUARY 1971	
1. SERIAL NUMBER 010032		2. NAME (Last-First-Middle) WOODS JAMES S			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS (CORRECTION)			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 01 10 71		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V C TO V XX		V TO C C TO C		7. FINANCIAL ANALYSIS NO CHARGEABLE 1234-1186	
9. ORGANIZATIONAL DESIGNATIONS DDP/EUR DEVELOPMENT COMPLEMENT			10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.		
11. POSITION TITLE RECORDS ADM OFFICER			12. POSITION NUMBER 9997		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LS, PA, P)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE	
GS		0344.01	10 7	\$ 13,821	
18. REMARKS cc: Payroll TO CORRECT EFFECTIVE DATE TO READ 1/10/71 VICE 12/13/70 <i>HO: EUR</i>					
10A. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i> WILLIAM C. COOLEY, AC/E/Per		DATE SIGNED 1/21/71	10B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>		DATE SIGNED 1/21/71
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 58	20. EMPLOY CODE 18	21. OFFICE CODING NUMERIC ALPHABETIC 4477A EUR		22. STATION CODE 75013	23. INTEGRAL CODE
24. MOBILE CODE 1	25. DATE OF BIRTH MO. DA. YR. 02 20 28		26. DATE OF GRADE MO. DA. YR.		27. DATE OF LEI MO. DA. YR.
28. DATE EXPIRES MO. DA. YR.		29. SPECIAL REFERENCE	30. RETIREMENT DATA -ESC- -DICH- -TICK- -NONE-	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR. 76 12 13 70
33. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	34. SERV. COMP. DATE MO. DA. YR.		37. LONG COMP. DATE MO. DA. YR.		38. CAREER CATEGORY EAB. RESV. PROV. TEMP.
39. FEGLI/HEALTH INSURANCE CODE 0-WAIVER 1-YES	40. SOCIAL SECURITY NO	41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO DELAY IN SERVICE 2-DELAY IN SERVICE (LESS THAN 3 YEARS) 3-DELAY IN SERVICE (MORE THAN 3 YEARS)	42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS	
44. STATE TAX DATA FORM EXECUTED CODE NO. TAX STATE CODE	45. POSITION CONTROL CERTIFICATION 1-26-71 <i>[Signature]</i>	46. OP APPROVAL <i>[Signature]</i>		DATE APPROVED 1/26/71	

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 12 FEBRUARY 1971			
1. SERIAL NUMBER 010032		2. NAME (Last-First-Middle) WOODS, JAMES S							
3. NATURE OF PERSONNEL ACTION CHANGE OF FAN				4. EFFECTIVE DATE REQUESTED MONTH: 02 DAY: 12 YEAR: 71		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS XX V TO V OF TO V		V TO O OF TO O		7. FINANCIAL ANALYSIS NO. CHARGEABLE 1236-1186		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DOP/EUR DEVELOPMENT COMPLEMENT				10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.					
11. POSITION TITLE RECORDS ADM OFFICER				12. POSITION NUMBER 9997		13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GT, EB, IN, I)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0344.01		10 7		\$ 13,821			
18. REMARKS FROM 1234-1186 cc: Payroll <i>KHB:EUR</i>									
19A. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i> WILLFORD C. TAYLOR, C/E/PO				DATE SIGNED 12 Feb 71		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>			
				DATE SIGNED 17 Feb 71					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE 37	20. EMPLOY CODE 18	21. OFFICE CODING NUMERIC: 44997 ALPHABETIC: EUR		22. STATUS CODE 75013	23. INTEGREE CODE	24. MOBILE CODE 1	25. DATE OF BIRTH MO: 02 DA: 20 YR: 48	26. DATE OF GRADE MO: DA: YR:	27. DATE OF LET MO: DA: YR:
28. WTE EXPRESS MO: CA: YR:		29. SPECIAL REFERENCE	30. RETIREMENT DATA 1-YES 2-ORGN 3-FICA 4-NONE		31. SEPARATION DATA CODE	32. LOBSTRUCTION/CANCELLATION DATA TYPE: MO: DA: YR:		33. SECURITY REG. NO.	34. SEX
35. WTE PREFERENCE CODE: 0-NONE 1-5 PR 2-10 PR		36. SERV. COMP. DATE MO: DA: YR:		37. LONG COMP. DATE MO: DA: YR:		38. CAREER CATEGORY EA/PSY PROV/TEMP		39. FEGLI/HEALTH INSURANCE CODE: 0-NONE 1-YES	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE: 0-NONE 1-BEFORE SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42. LEAVE CAT CODE		43. FEDERAL TAX DATA CODE: 1-YES 2-NONE		44. STATE TAX DATA CODE: 1-YES 2-NONE	
45. POSITION CONTROL CERTIFICATION 2-17-71 km						46. OP APPROVAL <i>[Signature]</i> W.R.H.		DATE APPROVED 2-17-71	

SECRET
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle) WOODS, JAMES S.	NAME AND RELATIONSHIP OF DEPENDENT* SELF	CLAIM NUMBER 70-0961
<p>There is on file in the Personal Affairs 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 <u>6 MAY 1970</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE 19 JUNE 1970	SIGNATURE OF OSD REPRESENTATIVE /s/ R. L. Austin, Jr.	
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

SECRET

14 May 1968

Approved

MEMORANDUM FOR: FE Career Management Committee

SUBJECT: Recommendation for Promotion for Mr. James S. Woods
from GS-09 to GS-10

1. FE Vietnam Operations concurs in the field recommendation for the promotion of Mr. James S. Woods from GS-09 to GS-10. Following is the recommendation from the Chief, Operational Services Branch, Vietnam Station.

"Subject has been with the Organization since April 1952 and has served at Vietnam Station as Chief, RI since January 1967. Subject was last promoted in 1958.

"As Chief, RI at Vietnam Station, Subject is responsible for the supervision of eleven personnel engaged in highly diversified activities, all subject to tight scheduling and deadlines. Examples of some of the diversified activities for which Subject is responsible are courier service throughout Vietnam, cable secretariat functions and intelligence reports reproduction and distribution, in addition to the classic registry functions normally performed by a station registry.

"Subject has energetically applied himself to improving procedures within his Section and to the cross-training of employees under his supervision to provide flexibility in his operations. His efforts in these areas bore welcome fruit during the recent disturbances when his Section was placed on twenty-four (24) hour duty for several weeks. During this period, while operating with a reduced staff and an ever-increasing workload, Subject kept all services operationally effective and on a timely basis with the exception of the in-country courier runs which were interrupted for a few days by circumstances beyond his control.

"Subject is a dedicated, conscientious and loyal employee. He is cooperative, exercises initiative in accomplishing the tasks at hand and responds favorably to constructive criticism. Personnel in his section perform their duties in a friendly, courteous and efficient manner. Their attitude, which is an expression of the direction received, has been brought to the attention of the writer on numerous occasions by various Station personnel.

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2

"Subject is an acknowledged expert in his chosen field. He constantly seeks out new methods, equipment and knowledge pertaining to his profession and is furthering himself academically through attendance at the local University extension. He has the background and drive to provide potential for assumption of more senior positions in his field. In view of Subject's strong performance, extensive overseas experience in a variety of situations and length of time in his present grade he is strongly recommended for promotion to the GS-10 level."

2. If promoted, Subject will occupy the position of 10 General, GS-11, Slot # 4984.

John Caswell
Douglas S. Blaufarb
Chief, Vietnam Operations

SECRET

S E C R E T

4 March 1968

MEMORANDUM FOR: Chief of Station

SUBJECT : Recommendation for Promotion -
Mr. James S. Woods

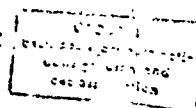
1. It is recommended that Subject be promoted from GS-09 to GS-10. Subject has been with the Organization since April 1952 and has served at Vietnam Station as Chief, RI since January 1967. Subject was last promoted in 1958.

2. As Chief, RI at Vietnam Station, Subject is responsible for the supervision of eleven personnel engaged in a highly diversified activities, all subject to tight scheduling and deadlines. Examples of some of the diversified activities for which Subject is responsible are courier service throughout Vietnam, cable secretariat functions and intelligence reports reproduction and distribution, in addition to the classic registry functions normally performed by a station registry.

3. Subject has energetically applied himself to improving procedures within his Section and to the cross training of employees under his supervision to provide flexibility in his operations. His efforts in these areas bore welcome fruit during the recent disturbances when his Section was placed on twenty-four (24) hour duty for several weeks. During this period, while operating with a reduced staff and an ever increasing workload, Subject kept all services operationally effective and on a timely basis with the exception of the in-country courier runs which were interrupted for a few days by circumstances beyond his control.

4. Subject is a dedicated, conscientious and loyal employee. He is cooperative, exercises initiative in accomplishing the tasks at hand and responds favorably to constructive criticism. Personnel in his Section perform their duties in a friendly, courteous and efficient manner. Their attitude, which is an expression of the direction received, has been brought to the attention of the writer on numerous occasions by various Station personnel.

S E C R E T



S E C R E T

- 2 -

5. Subject is an acknowledged expert in his chosen field. He constantly seeks out new methods, equipment and knowledge pertaining to his profession and is furthering himself academically through attendance at the local University extension. He has the background and drive to provide potential for assumption of more senior positions in his field. In view of Subject's strong performance, extensive overseas experience in a variety of situations and length of time in his present grade he is strongly recommended for promotion to the GS-10 level.

/s/John K. Smith

Chief, OSB

CONCUR /s/Vincent Lockhart
Acting Deputy Chief of Station

APPROVE: /s/Lewis J. Lapham
Chief of Station

S E C R E T

PRA SECRET
(10 Nov 64 Ed. 1a)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1 SERIAL NUMBER		3 NAME (Last-First-Middle)		8 Oct 1968	
010022		WOODS, JAMES S.			
2 NATURE OF PERSONNEL ACTION			4 EFFECTIVE DATE REQUESTED		5 CATEGORY OF EMPLOYMENT
REASSIGNMENT			M O Y 70		REGULAR
6 AIDS		7 FINANCIAL ANALYSIS NO CHARGEABLE		8 LEGAL AUTHORITY (Completed by Office of Personnel)	
V TO V C TO V		V TO C C TO C		9136 1214	
9 ORGANIZATIONAL DESIGNATIONS			10 LOCATION OF OFFICIAL STATION		
DIP/EUR FOREIGN FIELD BRITISH COMMONWEALTH REGION LONDON STATION SUPPORT BRANCH RECORDS SECTION			LONDON, ENGLAND		
11 POSITION TITLE			12 POSITION NUMBER	13 CAREER SERVICE DESIGNATION	
RECORDS ADM OF (09)			0254	D	
14 CLASSIFICATION SCHEDULE (G.S. L.B. No.)		15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE	
GR		0344:01	10 6	\$ 10,887	
18 REMARKS					
CONCUR: Mary Boulger FE/Pers By Phone 259a Attached PRA 20-F1-D(1/2) (B) N 15 2 Y R. via Imogene King					
19A SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED	19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED
WILLFORD C. TAYLOR, C/E/Pers		7 Oct 68	Valerie M. White		28 Oct 1968
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
20 ACTION CODE	28 EMPLOY CODE	31 OFFICE CODING		32 STATION CODE	33 PATHFINDER CODE
37 10		44525 EUR		21025	3 52 20 28
29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA		33 EOD DATA
110370	S3				EOD DATA
35 YET PRESENCE	36 SERV. COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY	39 FECA/HEALTH INSURANCE	
40 PERIODS CIVILIAN GOVERNMENT SERVICE		41 LEAVE CAT. CODE	42 FEDERAL TAX DATA		43 STATE TAX DATA
44 POLARON CONTROL CERTIFICATION			45 OP APPROVAL		DATE APPROVED
Form FE			10 28 68		10/28/68

FORM 3-67 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

(1)

SAR

SECRET
(If box filled in)

REQUEST FOR PERSONNEL ACTION		DATE PREPARED 23 July 1968
1 SERIAL NUMBER 010032	2 NAME (Last-First-Middle) WOODS JAMES S	
3 NATURE OF PERSONNEL ACTION PROMOTION		4 EFFECTIVE DATE REQUESTED MONTH: 07 DAY: 28 YEAR: 68
5 FUND CF TO V		6 CATEGORY OF EMPLOYMENT REGULAR
7 FINANCIAL ANALYSIS NO CHARGEABLE 9137 1487		8 LEGAL AUTHORITY (Complied by Officer of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DEP/FE FOREIGN FIELD FE/VSO - VIET NAM STATION INTELLIGENCE DIVISION COLLATION BRANCH CURRENT INTELLIGENCE SECTION BIOGRAPHIC UNIT		10 LOCATION OF OFFICIAL STATION SAIGON, South Vietnam.
11 RECORDS ADMIN OF D 11		12 POSITION NUMBER 4984
13 OCCUPATIONAL SERIES 0344.01		14 GRADE AND STEP 10 6
15 CLASSIFICATION SYMBOL (GA, LB, etc.) OS		16 SALARY OR RATE \$ 10847
17 REMARKS RECORDS ADMIN OFFICER OCCUPYING IO GENERAL POSITION.		
18A SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i> CFE/PERSONNEL, Mary T. Boulger		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>
DATE SIGNED 23 July 68		DATE SIGNED 21
SPACE SHOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL		
19 ACTION CODE 22 10	20 EMPLOYMENT CODE FE	21 STATION CODE 7705
22 DATE OF BIRTH MO. DA. YR. 3 22 20128	23 DATE OF GRADE MO. DA. YR.	24 DATE OF LEI MO. DA. YR.
25 RETIREMENT DATA MO. DA. YR.	26 SEPARATION DATA CODE TYPE	27 CORRECTION CANCELLATION DATA MO. DA. YR.
28 SECURITY REG NO	29 SOCIAL SECURITY NO	
30 PERIODS OF GOVERNMENT SERVICE CODE 0 - NO PERIODS LISTED 1 - NO CODE & PERIOD 2 - PERIODS LISTED (LESS THAN 3 YEARS) 3 - PERIODS LISTED (MORE THAN 3 YEARS)	31 LEAVE LAF CODE	32 FEDERAL TAX DATA FORM EXECUTED CODE 1-75 2-80
33 STATE TAX DATA CODE 1-75 2-80	34 SOCIAL SECURITY NO	35 DATE APPROVED <i>[Signature]</i> 25/10/68

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION					DATE PREPARED 17 NOVEMBER																				
1 SERIAL NUMBER 010032		2 NAME (Last-First-Initial) WOODS, JAMES S.																							
3 NATURE OF PERSONNEL ACTION REASSIGNMENT			4 EFFECTIVE DATE REQUESTED MONTH: 12 DAY: 16 YEAR: 66		5 CATEGORY OF EMPLOYMENT REGULAR																				
6 FUNDS V TO V O TO V		V TO O X O TO O		7 FINANCIAL ANALYSIS NO. CHARGEABLE 7137-1487		8 LEGAL AUTHORITY (Completed by Office of Personnel)																			
9 ORGANIZATIONAL DESIGNATIONS DDP/FE/FOREIGN FIELD FE/VNC - VIETNAM STATION EXECUTIVE OFFICE REGISTRY SECTION				10 LOCATION OF OFFICIAL STATION EAIGON, SOUTH VIETNAM																					
11 POSITION TITLE RECORDS ADMIN OF GS-11 (11)				12 POSITION NUMBER 4127		13 CAREER SERVICE DESIGNATION D																			
14 CLASSIFICATION SCHEDULE (G.S. I.A. OR.) GS		15 OCCUPATIONAL SERIES 0344.01		16 GRADE AND STEP 09/A 7		17 SALARY OR RATE \$ 9001-9262																			
18 REMARKS FROM: JKO/TOKYO STATION/OFFICE OF THE CHIEF/ CENTRAL REGISTRY AND RECORDS SECTION																									
18A SIGNATURE OF REQUESTING OFFICER <i>[Signature]</i> R. T. BOULGER, CEE/PAS			DATE SIGNED 2 Dec 66		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>		DATE SIGNED 20 Dec 66																		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																									
19 ACTION CODE 3M 10		20 EMPLOY CODE 45500 FE		21 OFFICE CODE NUMERIC: 77265 ALPHABETIC: FE		22 STATION CODE		23 INDICATOR CODE		24 HDQRS CODE 5		25 DATE OF BIRTH MO: 02 DA: 20 YR: 28		26 DATE OF GRADE MO: DA: YR:		27 DATE OF-LEI MO: DA: YR:									
28 HTE EXPIRES MO: DA: YR:		29 SPECIAL REFERENCE		30 RETIREMENT DATA 1-EX 2-PA 3-NONE		31 SEPARATION DATA CODE		32 CANCELLATION DATA EOD DATA		33 SECURITY REQ NO		34 SER		35 VET PREFERENCE CODE: 0-NONE 1-1 PT 2-10 PT		36 SERV COMP DATE MO: DA: YR:		37 LONG COMP DATE MO: DA: YR:		38 CAREER CATEGORY CODE: 1-115 2-96		39 HEALTH INSURANCE CODE: 0-HEALTH 1-YES		40 SOCIAL SECURITY NO	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE: 0-NO PREVIOUS SERVICE 1-NO YEARS IN SERVICE 2-BRIEF IN SERVICE (LESS THAN 3 YEARS) 3-BRIEF IN SERVICE (MORE THAN 3 YEARS)				42 LEAVE CAT CODE		43 FEDERAL TAX DATA CODE: 1-YES 2-NO		44 STATE TAX DATA CODE: 1-YES 2-NO		45 POSITION CONTROL CERTIFICATION 170766N		46 OF APPROVAL <i>[Signature]</i> DATE APPROVED 12/1/66													

SECRET

(When Filled In)

F-14

REQUEST FOR PERSONNEL ACTION				DATE PREPARED				
1 SERIAL NUMBER 010032				2 NAME (Last-First-Middle) WOOLS, JAMES S.				
3 NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM				4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 12 18 66		5 CATEGORY OF EMPLOYMENT REGULAR		
6 FUNDS V TO V CP TO V		V TO CP CP TO CP		7 FINANCIAL ANALYSIS NO CHARGEABLE 7137-1566		8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 Sect. 203		
9 ORGANIZATIONAL DESIGNATIONS DDP/FE				10 LOCATION OF OFFICIAL STATION TOKYO, JAPAN				
11 POSITION TITLE		12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION D				
14 CLASSIFICATION SCHEDULE (GS, E.B., etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP 9		17 SALARY OF RATE 5		
18 REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.								
18A SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		
DATE SIGNED				DATE SIGNED				
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 SWIC/SEE CODE	24 HODGES CODE	25 DATE OF BIRTH MO DA YR	
26 BSE EXPRES. MO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-CSE 2-SEER 3-NONE		31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA TYPE MO DA YR	33 SECURITY RIG NO	34 SEX	
35 VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36 MEN COMP DATE MO DA YR	37 LOGG COMP DATE MO DA YR	38 CAREER CATEGORY L&S PERS PROF. TEMP	39 FECLL HEALTH INSURANCE CODE CODE 0-WAIVER 1-YES	40 SOCIAL SECURITY NO			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE EXT CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1-YES 2-NO	44 STATE TAX DATA FORM EXEMPTED CODE NO TAX EXEMPTIONS 1-YES 2-NO	45 POSITION CONTROL CERTIFICATION 11-21-66 EN			46 OP APPROVAL DATE APPROVED See memo signed by D/Pers dated 16 NOV 66

5 January 1966

MEMORANDUM FOR: FE Career Management Committee

SUBJECT: Recommendation for Promotion
of Mr. James S. Woods
from GS-09 to GS-10

1. It is strongly recommended that Mr. James S. Woods be promoted from GS-09 to GS-10. Mr. Woods entered on duty with the Agency in April 1952 as a GS-03 Records and File Clerk assigned to RFD. Since that time Mr. Woods has served as a Receiver Analyst at Headquarters in Rome and Alugh, Manila, and since 1981 in the Central Registry Section of the Tokyo Station. Mr. Woods is 37 years old and has been in grade at a GS-09 since 1958. He was previously recommended for promotion to GS-10 in November 1964 and June 1965.

2. In the promotion recommendation for the Tokyo Station, 9 November 1964, the Director commented on Mr. Woods as follows:

"A. Mr. Woods is now on his second tour as Chief of the Tokyo Station Registry. This unit is located at the main Air Station and handles all correspondence for all Station elements. In view of the fact that the station is located in a different geographic location, a great deal of responsibility is given to Mr. Woods to insure that action responsibility in incoming cables is rapidly and properly analyzed, dispatched and correctly routed and processed. Messages from other local military agencies are correctly analyzed and routed. The day-a-day routine system is functioning effectively, and the Chief Registrywriter is rapidly turning out priority dispatches.

"B. The Registry is presently composed of six employees in addition to Mr. Woods as Chief of this unit. Mr. Woods does an exemplary job of supervising these employees with the result that the Registry is a model of the well-functioning unit.

Not Approved
3/1/66

Group 1
Excluded from automatic
downgrading and
declassification

SECRET

"C. In addition to his normal duties, Mr. Woods is constantly thinking of ways to increase the efficiency of the Station Registry, and to be of greater assistance to the Station as a whole. Several of his ideas have been adopted by the Station with a resulting increase in effectiveness. His positive approach to all problems and his cheerfulness and willingness to perform any task have benefited both the Station and the Agency.

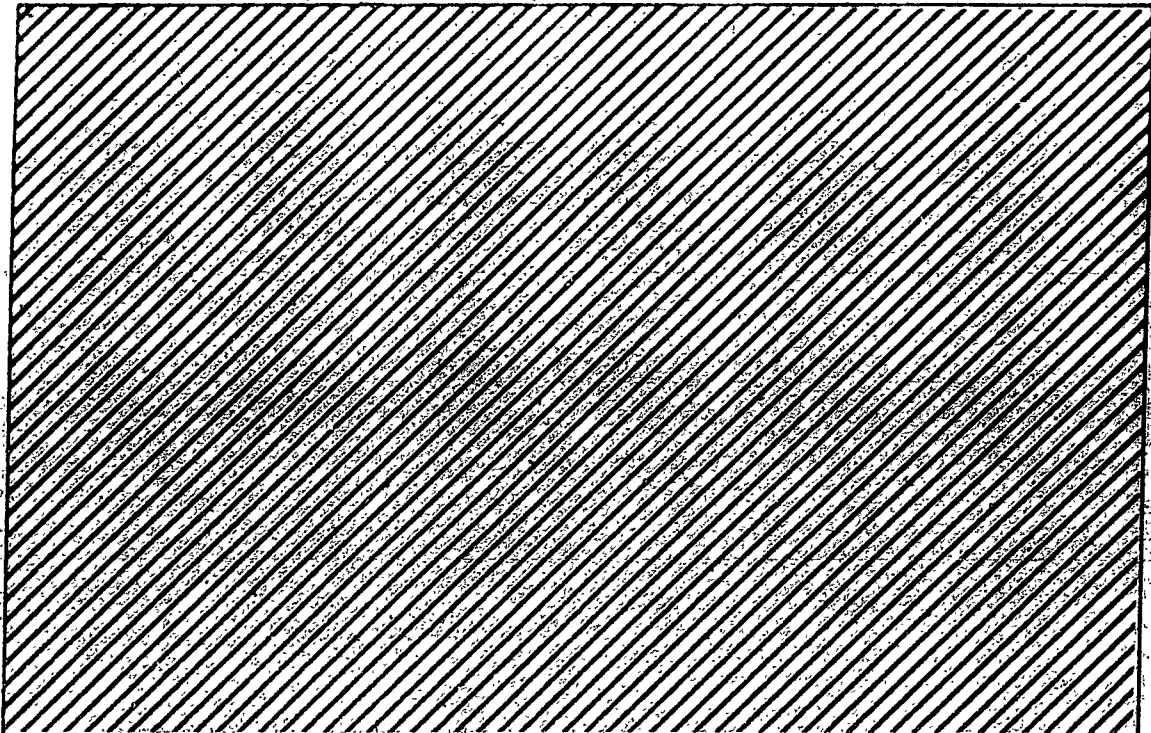
"D. In view of Mr. Woods' demonstrated ability to provide leadership to the Station Registry unit, his positive approach to the solution of the many problems which arise daily here, it is strongly recommended that he be promoted from GS-09 to GS-10 at the earliest opportunity.

Mr. Woods has continued to perform in an "over-all" manner as evidenced by his recent Annual Report. He recently planned and effectively implemented the move of the Club's Secretariat from one location to another. In a dispatch, dated 22 November, 1955, the present Chief of Station, Thayer, stated "There is little to add to my predecessor's recommendation dated 9 November 1954, for promotion of Mr. Woods. He is performing his duties as Chief of the Club's Registry with a thoroughness and dependability. He is a strong supervisor who has successfully achieved the difficult task of the care of his personnel and materials."

The current Chief of Station, Thayer, commended Mr. Woods' qualifications and Mr. Woods be promoted from GS-09 to GS-10. Thayer is a strong supervisor who has successfully achieved the difficult task of the care of his personnel and materials. Mr. Woods be promoted from GS-09 to GS-10 at the

Terry T. Shima
Richard G. Davis
Chief, REGISTRATION

SECRET
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
Woods, James S.	Louise A. - wife	66-502

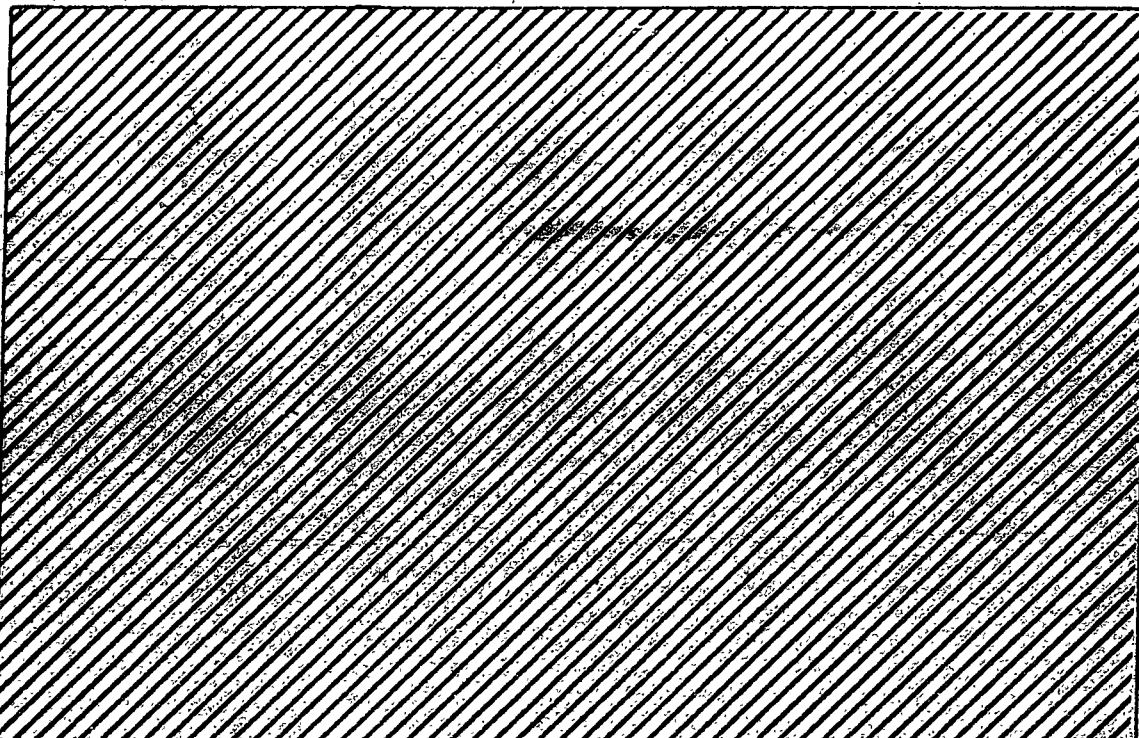
There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 26 October 1965.

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 17 DEC 1965	SIGNATURE OF BSD REPRESENTATIVE <i>B. DeFolice</i>
-------------------------------	-------------------------------------------------------

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle) Woods, James S.	NAME AND RELATIONSHIP OF DEPENDENT* Wife - Louise A.	CLAIM NUMBER 66-148
---------------------------------------------------------	---------------------------------------------------------	------------------------

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 26 June 1965.

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 17 AUG 1965	SIGNATURE OF BSD REPRESENTATIVE <i>B. De Felice</i>
-------------------------------	--------------------------------------------------------

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 10 Feb 1961							
1. SERIAL NUMBER 110032		2. NAME (Last-First-Middle) WOODS, James S.											
3. NATURE OF PERSONNEL ACTION Reassignment and Transfer to Confidential funds 03 19 61				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 03 19 61									
5. FUNDS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;"><input type="checkbox"/> V TO V</td> <td style="width:33%;"><input checked="" type="checkbox"/> X V TO CF</td> <td style="width:33%;"></td> </tr> <tr> <td><input type="checkbox"/> CF TO V</td> <td><input type="checkbox"/> CF TO CF</td> <td></td> </tr> </table>				<input type="checkbox"/> V TO V	<input checked="" type="checkbox"/> X V TO CF		<input type="checkbox"/> CF TO V	<input type="checkbox"/> CF TO CF		6. CATEGORY OF EMPLOYMENT Regular		7. COST CENTER NO. CHARGEABLE 1137-7351-1000	
<input type="checkbox"/> V TO V	<input checked="" type="checkbox"/> X V TO CF												
<input type="checkbox"/> CF TO V	<input type="checkbox"/> CF TO CF												
8. LEGAL AUTHORITY (Completed by Office of Personnel)													
9. ORGANIZATIONAL DESIGNATIONS DDP/FE FE/JAO Tokyo Station Office of the Chief Central Registry and Records Section				10. LOCATION OF OFFICIAL STATION Tokyo, Japan									
11. POSITION TITLE Intel Analyst - Gen		12. POSITION NUMBER 12-D 3061		12A. PCR CONTROL NO.		13. CAREER SERVICE DESIGNATION D							
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		15. OCCUPATIONAL SERIES 0132.36		16. GRADE AND STEP 09 3		17. SALARY OR RATE 6765							
18. REMARKS FROM: FE/Office of the Chief/2461 tray 1 lcc - Security Form 259 forwarded to Medical Staff Departure Date: 31 March 1961 FE/CMC Approved <i>Security App. 2/16/61 MA 3/14/61</i>													
19. SIGNATURE OF REQUESTING OFFICIAL <i>Robert D. Cashman</i> ROBERT D. CASHMAN, CFE PERSONNEL				20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>W. J. Reedy</i>									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
21. ACTION CODE	22. EMPLOY CODE	23. OFFICE CODE NIPUBLIC REFERENCE	24. STATION CODE	25. INTEROFF CODE	26. MONTH CODE	27. DATE OF BIRTH MO DA YR	28. DATE OF LEAVE MO DA YR	29. DATE OF LET MO DA YR					
11	11	5130	12		3	02 20 28							
30. NET. PREFERENCE CODE	31. SEC. COMP. DATE	32. LONG. COMP. DATE	33. MIL SER. CODE	34. PERM. / HEALTH INSURANCE	35. SECURITY REL. NO.			36. SEX					
					EOD DATA →								
37. PREVIOUS GOVERNMENT SERVICE DATA		38. MILITARY DATA		39. STATE TAX DATA		40. FORM EXECUTED		41. STATE CODE					
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 12 MONTHS) 3 - BREAK IN SERVICE (MORE THAN 12 MONTHS)		1 - YES 2 - NO		1 - YES 2 - NO		1 - YES 2 - NO							
42. POSITION CONTROL CERTIFICATION				43. O.P. APPROVAL <i>W. J. Reedy</i>									

S-E-C-R-E-T

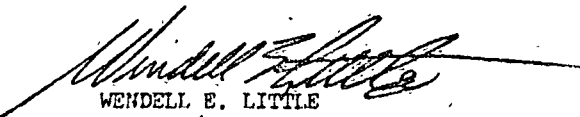
MEMORANDUM FOR: James S. Woods

VIA : Chief, FE

1. The problem of effective management of the operational records of the Clandestine Services is one of our most important responsibilities. In this connection, you have been selected by your Division, and authorized by the Clandestine Services Records Committee, to act as Records Officer for your component. Your selection is based on your professional qualifications to carry out an assignment requiring experience, judgment, and a knowledge of the objectives of the Clandestine Services. A copy of this memorandum will be placed in your official personnel folder to record your appointment as Records Officer.

2. You are to act on behalf of your Division or Staff element in authorizing the destruction of material of no value to the Clandestine Services in accordance with criteria established for this purpose. You are empowered to authorize the destruction of documents and index cards recommended for destruction by other members of your Branch, and to desensitize KAPOK and RYBAT material which is no longer sensitive or which has been restricted in error. Your signature will be recognized by RID as that of an officially appointed Records Officer.

3. At the meeting of 16 December 1958, you were briefed on the details of your duties as Records Officer. It is now considered that you will be able fully to execute your duties as Records Officer and thus make a real contribution to the CS Records Management Program.


WENDELL E. LITTLE
DDP/RMO

cc: Personnel Jacket of Addressee

S-E-C-R-E-T

SECRET

REQUEST FOR PERSONNEL ACTION															
1. Serial No.		2. Name (Last-First-Middle)			3. Date Of Birth			4. Vet. Prof.		5. Sex		6. CS - LOD			
Mo.	Da.	Yr.	None-0	Code	Mo.	Da.	Yr.	5 Pt-1	10 Pt-9	M	F	Mo.	Da.	Yr.	
510032	WOODS JAMES S			02	20	28	1	1				04	21	52	
7. SCD		8. CSC Name			9. CSC Or Other Legal Authority			10. Apmt. Affidav.		11. FEGLI		12. LCD		13. ...	
Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.	Yes-1	Code	
11	12	48	No-2	1	50	USCA	403	No-2	/	04	21	52	No-2	2	

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code			
DDP FE FE/PSM PHILIPPINES STATION SUPPORT BRANCH				5161		MANILA, R.P.				57557			
16. Dept. - Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series					
5		RECORDS MGMT ANAL		3382		GS		0306.01					
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number			
09 1		\$ 5985		01		11 16 58		11 15 59		9 3700 55 006			

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
Reassignment		01		3 22 59		Regular		01			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code			
DDP/FE Office of the Chief Secretariat				5112		Washington, D. C.				25013			
33. Dept. - Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series					
5		RECORDS MGMT OF		2461		SR-11							
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number			
										9 3700 20 001			

SOURCE OF REQUEST

A. Requested By (Name And Title) Harriet Weller, CFE/Secretariat		C. Request Approved By (Signature And Title) M. L. Shobe, CFE/Personnel	
B. For Additional Information Call (Name & Telephone Ext.) Mozelle Little X2957			

CLEARANCES

Clearance		Signature		Date		Clearance		Signature		Date	
A. Career Board		[Signature]		3-12-59		D. Placement					
B. Pos. Control		[Signature]				E.					
C. Classification						F. Approved By		[Signature]			

Remarks
 please transfer from Unvouchered to Vouchered funds
 2 Copies to Security
 w/o file

SECRET

SECRET

REQUEST FOR PERSONNEL ACTION

6 October 1958

1. Serial No. 510032		2. Name (Last-First-Middle) WOODS JAMES S			3. Date Of Birth Mo. Da. Yr. 02 20 28			4. Vol. Pref. None-0 5 Pt-1 10 Pt-2 Code 1		5. Sex M 1		6. CS - LOD Mo. Da. Yr. 04 21 52			
7. <u>SCD</u>		8. CSC Reimt. Yes-1 No-2 Code 1			9. CSC Or Other Legal Authority 50 USCA 303			10. Apmt. Allidiv. Mo. Da. Yr.		11. FEGLI Yes-1 No-2 Code 04		12. LCD Mo. Da. Yr. 04 21 52		13. Mil. Serv. Lea. Yes-1 No-2 Code 2	

PREVIOUS ASSIGNMENT

14. Organizational Designations DDP FE BRANCH 3 PHILIPPINES STATION ADMIN. SEC				Code 5161		15. Location Of Official Station MANILA, R.P.				Station Code 57557		
16. Dept. Field Dept. USStd. Frqn. Code 5		17. Position Title RECORDS MGMT ANALYST				18. Position No. 3382		19. Serv. GS		20. Occup. Series 0306.01		
21. Grade & Step 07 8 4		22. Salary Or Rate \$ 4795		23. SD DI		24. Date Of Grade Mo. Da. Yr. 04 10 55		25. PSI Due Mo. Da. Yr. 04 06 59		26. Appropriation Number 9-3780-55-006		

ACTION

27. Nature Of Action Promotion		Code 30		28. Eff. Date Mo. Da. Yr. 11 16 58		29. Type Of Employee Regular		Code 01		30. Separation Data	
-----------------------------------	--	------------	--	------------------------------------------	--	---------------------------------	--	------------	--	---------------------	--

PRESENT ASSIGNMENT

31. Organizational Designations DDP/FE FE/PSH - Philippines Station Support Branch				Code 5161		32. Location Of Official Station				Station Code 57557		
33. Dept. Field Dept. USStd. Frqn. Code 5		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series		
38. Grade & Step 9 1		39. Salary Or Rate \$ 5085		40. SD		41. Date Of Grade Mo. Da. Yr. 11 16 58		42. PSI Due Mo. Da. Yr. 11 15 59		43. Appropriation Number 9-3780-55-006		

SOURCE OF REQUEST

A. Requester (Name And Title) Arthur P. ...		C. Request Approved By (Signature And Title) ...	
B. For Additional Information Call (Name & Telephone Ext.) Monelle L...			

CLEARANCES

Clearance		Signature		Date	
A. Career Board	RP ...	11/13/58	D. Placement		
B. Pos. Control		11/15/58	E.		
C. Classification	...	11/14/58	F. Approved By	...	11/14/58

Remarks: Request for promotion slot to GS-9 submitted to Wage & Salary Division. (Hold promotion in Career Panel until slot approved.)

recorded by
CSFD
1958 (4)

SECRET

00000
Stinberg
COPY

AIR

1024-A-9355
(50-1-5)

Chief, WH Division
ATTN : Chief, RI
Chief of Station, Mexico City

31 January 1958

Administrative

EDY Service - RI Team

ACTION REQUIRED: Routing copies to Personnel files of employees concerned

1. During the period of February to August 1957, Francis E. SUCY, James S. MOORE, Dorothy SPICKA, Virginia LONG, and Sarah J. BENNETT served the Mexico City Station as a Records Reorganization team. The Chief of Station, Mexico City, wishes to make it a matter of record that the RI employees listed above served efficiently and well and were a fine addition to this station during their service here.

2. Mexico City Station wishes to acknowledge at this time, not only the exemplary service rendered by these employees but also the splendid support that RI Division has given to this station.

3. The RI employees named in paragraph 1 worked hard (expending many hours more than the forty normal work hours each week) and efficiently on Mexico City Station files. In addition, they were congenial, friendly and a pleasure to have in the Station.

WINSTON SCOTT

ACB/cps

29 January 1958

Distribution:

8 - Hqs.

2 - Files

~~SECRET~~

STANDARD FORM 52 FORMERLY GATE OF THE U. S. CIVIL SERVICE COMMISSION AND EFF. 10-1-55 FEDERAL PERSONNEL MANUAL CHAPTER IV <p style="text-align: center;">REQUEST FOR PERSONNEL ACTION</p>	UNVOUCHERED
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs. — One given name, initial(s), and surname) MR. James S. Woods	2. DATE OF BIRTH 20 Feb. 1928	3. REQUEST NO.	4. DATE OF REQUEST 5 July 1957
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment — transfer to US funds		6. EFFECTIVE DATE A. PROPOSED: 5/17/57 B. APPROVED: 5 Sept 57	7. C. S. OR OTHER LEGAL AUTHORITY:
8. POSITION (Specify whether establish, change grade or title, etc.)			

FROM: Intel Analyst BV-430.12 GS-0132.35-7 4795 \$4600.00 p/a DDP/PI Records Integration Division Analysis & Operations Branch Analysis Section Washington, D.C.	9. POSITION TITLE AND NUMBER	10. SERVICE GRADE AND SALARY	11. ORGANIZATIONAL DESIGNATIONS	TO: Intel Analyst BFF-352 Records Integration GS-0132.35-7 4795 \$4600.00 p/a DDP/PI GS-0106.01-7 Branch 3 - Philippines Station Administrative Section Manila, R.P.
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		

A. REMARKS (Use reverse if necessary)
 * Memo dtd 18 June 1957 to Mgn staff via SSA/DD/S requesting that three RI Positions (1 GS-9 and 2 GS-7n - Record Analyst) be established on the Manila T/O. Woods to be slotted against the GS-9 slot.
 Please call FE/PI/III x 4009 for effective date.
 2 copies to Security.

B. REASON FOR REQUEST RONALD GAGE, FE/PI/III OFFICER	D. REQUEST APPROVED BY <i>[Signature]</i> Signature: _____ Title: _____			
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) Jimmie Dewberry x 2957	E. CONCURRENCE & FIT. REP. <i>[Signature]</i>			
13. VETERAN PREFERENCE NONE <input type="checkbox"/> WWII <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> SPT. <input type="checkbox"/> 10 POINT <input type="checkbox"/> DISAB. OTHER <input type="checkbox"/>	14. POSITION CLASSIFICATION ACTION <input type="checkbox"/> NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input checked="" type="checkbox"/> SD:DI			
15. SEX M.	16. APPROPRIATION FROM 8-2309-23 TO 8-3780-55-006	17. SUBJECT TO C. S. RETIREMENT ACT (U.S.-NO) Yes	18. DATE OF APPOINTMENT AFFIDAVIT (APPROVING ONLY)	19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:

20. STANDARD FORM 50 REMARKS
 D.O.C. 04.10.55.
 PSI - 04.06.58
 No L.W.

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL	<i>[Signature]</i>	6/25	
C. CLASSIFICATION			
D. PLACEMENT OR ENPL.	D. L. REEDY		
E.			

F. APPROVED BY
[Signature]
 104, D.O.C. to be forwarded to, signed
 9/12/57
 16 August 57

STANDARD FORM 52
 PREPARED BY THE
 U. S. GOVERNMENT PRINTING OFFICE
 WASHINGTON, D. C.

VOUCHERED

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One from name, initial(s), and surname) Mr. James C. Woods	2. DATE OF LETTER 20 Feb 1928	3. REQUEST NO.	4. DATE OF REQUEST 15 July 1956
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		D. APPROVED:	

FROM— BV-430.02	8. POSITION TITLE AND NUMBER Intel Analyst	TO— BV-430.12
	9. SERVICE GRADE AND SALARY GS-0132.35-7 \$4660.00 pa	
	10. ORGANIZATIONAL DESIGNATIONS DDP/PI Records Integration Division Analysis & Operations Branch Analysis Section Washington, D.C.	
	11. HEADQUARTERS	
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)
 Slot BV-430.02 was used for slotting purposes only--this action will eliminate double slotting.

B. REQUESTED BY (Name and title) John M. Scott, Chief, RIG	D. REQUEST APPROVED BY <i>Ch. M. [Signature]</i>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) Ruth Robinson, Ext. 2519	Signatures Title

13. VETERAN PREFERENCE		14. POSITION CLASSIFICATION ACTION	
NAME	WHICH OTHER S. PT.	NEW	VICE
	<input checked="" type="checkbox"/> OTHER		
15. SEX M	16. APPROPRIATION FROM: 7-2309-23 TO: 83223	17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) YES	18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)
20. STANDARD FORM 50 REMARKS APPROVED BY FI CAREER SERVICE BOARD DATE 16 Aug 56		19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE	

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL	LP	2/18/56	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	<i>[Signature]</i>	17 Aug 56	
E.			

E. APPROVED BY
[Signature] **17 Aug 56**

STANDARD FORM 52 FORMED DATE BY THE U. S. GOVERNMENT PRINTING OFFICE WASHINGTON, D. C. 20540	UNVOUCHERED TO VOUCHERED
REQUEST FOR PERSONNEL ACTION	

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr - Miss - Mrs - One given name, initials, and surname) Mr. James S. Woods	2. DATE OF BIRTH 20 Feb 1928	3. REQUEST NO.	4. DATE OF REQUEST 14 June 1956
5. NATURE OF ACTION REQUESTED. A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED:	

FROM— IO-CI OS-0136.53-7 DDP/FE Branch 1 - Korea Base Records Integration Branch Personality Files Section Yokosuka, Japan	BFF 583.05 \$4660.00	9. POSITION TITLE AND NUMBER 10. SERVICE GRADE AND SALARY 11. ORGANIZATIONAL DESIGNATIONS 7158 12. FIELD OR DEPARTMENTAL	TO— Intel Analyst OS-0136.53-7 DDP/FE Records Integration Division Analysis & Operations Branch Analysis Section Washington, D.C. BV-430.02 \$4660.00 pa
<input checked="" type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD	<input checked="" type="checkbox"/> DEPARTMENTAL

13. REMARKS (Use reverse if necessary)
Transfer from Unvouchered to Vouchered Funds.
Vice Lenore Johnson, transferring to EE.
Copies of this action have been submitted to Payroll and Security offices.
 CONCUR: *[Signature]*

14. REQUESTED BY (Name and title) John M. Scott, Chief, RI <i>[Signature]</i>	15. REQUEST APPROVED BY <i>[Signature]</i> Signature: Robert A. [unclear] Title: Exec AD-26 June 56
16. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) Ruth Robinson, Ext. 2510	

17. VETERAN PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5 PT <input type="checkbox"/> 10 POINT <input checked="" type="checkbox"/> DISAB <input type="checkbox"/> OTHER <input type="checkbox"/>	18. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> 1 <input type="checkbox"/> A <input type="checkbox"/> REAL <input type="checkbox"/> SD; DI
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

19. SEX M	20. APPROPRIATION FROM: 6-2740-55-096 TO: 6-2309-23	21. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes	22. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	23. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: DC
---------------------	-------------------------------------------------------------------------	------------------------------------------------------------	------------------------------------------------------	-------------------------------------------------------------------------------------------------------------

24. STANDARD FORM 50 REMARKS
[Handwritten notes and signatures]
26 June 56
21 June 56
6/29/56

25. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A			
B. CEIL OR POS CONTROL	<i>[Signature]</i>	4/21/56	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	<i>[Signature]</i>	10/2/55	
E			

APPROVED BY: *[Signature]*
 SECRET

SECRET

Name: WOODS, James S.

Date: 15 June 1956

CS Designation: DI

Nature of Action: Reassignment

FROM

TO

Pos. Title: I. O. (CI)

Intel Analyst

Grade: GS-7

GS-7

Division: DDP/FE

DDP/PI

Staff: Branch 1 - Korea Base

RI

Branch: Records Integration

Analysis WH & Operations

Section: Personality Files

Analysis

Hqrs: Yokosuka, Japan

Washington

I & R Comment

[Handwritten signature]
19 JUN 1956
Date

VIA: AIR

DISPATCH NO. PKLA 5486

SPECIFY AIR OR SEA POUCH

CONFIDENTIAL

CLASSIFICATION

4. FEB. 1955

TO: Chief, FE

DATE:

FROM: Chief, Korea Mission

INFC: Chief, Support Mission,
China

SUBJECT: GENERAL: Administrative/Personnel

SPECIFIC: Recommendation for Promotion -

James S. WOODS

1. It is recommended that James S. WOODS be promoted from GS-5 to GS-7. Subject entered on duty with the Korea Mission 26 July 1954.

2. WOODS presently occupies proposed Slot No. 21 which has been recommended as a GS-9 slot. Subject has been in grade as a GS-5 since 6 June 1953 and has performed the duties of his present assignment since 10 August 1954.

3. Subject has had approximately two years of experience in the maintenance of agent records. This experience has enabled him not only to assume his present responsibilities with a minimum of supervision, but also to initiate a completely new and improved system for the maintenance of the agent records of the Korea Mission. Due partially to the efficiency of the system that he has initiated and partially to the enthusiasm with which he approaches his work, FOENAG has assumed the work load previously handled by two individuals and at the same time has managed to keep his backlog to a minimum.

4. WOODS is conscientious, hard-working and more than willing to work long hours of overtime without additional compensation in order to maintain his section on a current basis. Subject individual devoted unusually long hours to reestablish himself during the recent move of this Mission to Japan. On the basis of work performance and motivation, subject is recommended as justly deserving of promotion to GS-7.

5. I certify that WOODS is performing the duties outlined in the job description attached hereto.

/s/ JOHN L. HARC

1 February 1955

1 ENCL - a/s

DISTRIBUTION:

1 - Chief, FE

1 - Chief, IN

CONFIDENTIAL

CLASSIFICATION

CONFIDENTIAL

PERSONNEL DELEGATION - James S. WOODS

1. Nature and Purpose of Work:

My position is that of intelligence analyst in the Personality File section of the Records Integration Branch. I am responsible for the maintenance of agent records and personality files.

2. Duties:

a. To maintain all agent records. This takes a good percentage of my time as it includes the following:

- (1) Make all KOMI file checks on PRQ's and file check requests, writing up the results and forwarding them to the proper agencies.
- (2) Make sure that all PRQ's and file check requests have the correct classification, the proper number of copies for distribution, correct name and telecodes, and are forwarded to the proper case officer or foreign unit.
- (3) See that the results of KOMI file checks received from Headquarters and CHIMI are properly carded and forwarded to the case officer concerned.
- (4) Keep all agent records up-to-date with regard to cryptonyms, FCC's, OC's and other additional information received.
- (5) Keep files on all terminated agents and see that the proper records are filled out and forwarded when they are terminated.

b. To maintain the RI card index, assuring that all cards received in RI are properly filed and have the correct names and telecodes.

c. To analyze, card and file all documents forwarded to Personality Files; these include State Station memos, HQ's, Contact Reports, COMINT Reports, RFI's, various intelligence summaries, etc.

3. Responsibility for the Work of Others:

N/A

4. Scope and Effect of Work:

I am responsible for making all KOMI file checks. I must see that they are made out thoroughly, quickly and accurately. My check may decide the outcome of hiring or refusing to hire a prospective agent or other employee for an operation or project.

5. Supervision and Guidance Received:

I receive no direct supervision or guidance in duties relating to the maintenance of agent records. I receive over-all policy guidance from the Chief of RI and some guidance from branch chiefs and case officers.

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CONFIDENTIAL

- 2 -

6. Mental Demands:

a. Initiative: In order to maintain agent records properly, I must always keep alert for new ways to keep them up-to-date and meet any demands that may be made for drawing up new procedures for the maintenance of agent records.

b. Originality: To adopt new ways of maintaining agent records without losing control over the flow of daily material.

c. Judgment: I must decide what action should be taken on all KQMI file checks, regarding what information is to be sent to Headquarters and CHIMI.

7. Personal Work Contacts:

I must maintain close personal contact with all case officers and branch chiefs in order that I may maintain up-to-date agent records.

8. Other:

I must maintain files of all documents routed to Personality Files. Also I must resolve problems the branch chiefs or case officers may have in regard to agent records.

Also, I have recently established a 201 agent record system for the Mission and am responsible for its continual maintenance.

CONFIDENTIAL

CHECK LIST FOR TRAINING

Thode, James S.

1. Typing

3. English Usage

2. Short-hand

4. Office Practice
(Electric typewriter, filing,
phone, Correspondence Manual,
addressing, office protocol.)

SECRET

STANDARD FORM 52
FORM 52 OF THE
U. S. GOVERNMENT PRINTING OFFICE
WASHINGTON, D. C. 20540
GPO: 1954 O - 250-000

YOU PLEASED TO
UNVOUCHERED

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname) Mr. James S. WOODS	2. DATE OF BIRTH 20 Feb 28	3. REQUEST NO.	4. DATE OF REQUEST 16 Feb 54
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: <i>Feb 25 1954</i>	

9. FROM: Intell. Anal. 27-469.08 GS-1325, \$3410.00 p.a. GS-042.55-5 DDP/PI Records Integration UNIT DIV Processing & Records Branch Consolidation Section Washington, D.C.	10. POSITION-TITLE AND NUMBER 16(FI) EFF 602.02-5	11. SERVICE, GRADE, AND SALARY GS-0136.51-15, \$3410.00 p.a.
12. ORGANIZATIONAL DESIGNATIONS UNCONVENTIONAL WARFARE	13. HEADQUARTERS Intelligence Division	14. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)

Transfer to Unvouchered Funds from Vouchered Funds.

Concur *John M. Scott* CHIEF, RI

B. REQUESTED BY H. S. Clinkscale, Personnel Officer	D. REQUEST APPROVED BY Signature: <i>Edward C. McManara</i> Title: <i>Asst. Dir. / PO</i>
C. FOR ADDITIONAL INFORMATION CALL (City and telephone extension) Edward P. Mitchell 15-1 28163	14. POSITION CLASSIFICATION ACTION GD-PI
15. VETERAN PREFERENCE NONE <input type="checkbox"/> WITH OTHER <input type="checkbox"/> 5 PT. <input type="checkbox"/> 10 POINT <input type="checkbox"/> (MSAB OTHER)	16. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F
17. ACQUISITION FROM: A-2300-20 TO: 1-3720-55-096	18. SUBJECT TO C. S. REGIMENT ACT (MS-NR) 10B
19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:

21. STANDARD FORM 50 REMARKS
Official okay
rec'd C. S. FI
16 Apr 54
Case 2300-20
16 Apr 54

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CELL OR POS. CONTROL	<i>Jm</i>	<i>29 Mar 54</i>	
C. CLASSIFICATION			
D. PLACEMENT ON EMPL.	<i>Edman</i>	<i>25 Mar 54</i>	
E.			

F. APPROVED BY
[Signature] **SECRET** *27 Apr 1954*

STANDARD FORM 52
 FORM 52 OF THE
 U. S. CIVIL SERVICE COMMISSION
 GENERAL REGULATION, PERSONNEL
 MANUAL, CHAPTER II

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
 If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initials, and surname) James S. Woods	2. DATE OF BIRTH 20 Feb 1928	3. REQUEST NO.	4. DATE OF REQUEST 1 June 1953
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Promotion		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: 7 June 53	

FROM— Intel. Anal. BV-469.08-4 GS 5-132 \$3175.00 pa DDP/PI Records Integration Division STAFF Processing & Records Branch Consolidation Section Washington, D.C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	9. POSITION TITLE AND NUMBER 10. SERVICE GRADE AND SALARY 11. ORGANIZATIONAL DESIGNATIONS 12. HEADQUARTERS 13. FIELD OR DEPARTMENTAL	TO— Intel. Anal. BV-469.08 GS 5-132 \$3410.00 pa DDP/PI Records Integration Division STAFF Processing & Records Branch Consolidation Section Washington, D.C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL
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A. REMARKS (Use reverse if necessary)
17 Aug
 Subject has been in grade since ~~21 April~~ **1952**.

B. REQUESTED BY (Name and title) JOHN M. SCOTT, Chief, R.E.	D. REQUEST APPROVED BY Signature: Edward C. McKeenan Title: Asst. Dir. FI/PO												
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) 2510	14. POSITION CLASSIFICATION ACTION NEW VICE I. A. REAL												
13. VETERAN PREFERENCE <table border="1"> <tr> <td>HONK</td> <td>WHN</td> <td>OTHLR</td> <td>S.P.T.</td> <td>10</td> <td>JOINT</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td>DISAB OTHER</td> </tr> </table>	HONK	WHN	OTHLR	S.P.T.	10	JOINT						DISAB OTHER	15. SEX 16. RACE 17. APPROPRIATION FROM: TO:
HONK	WHN	OTHLR	S.P.T.	10	JOINT								
					DISAB OTHER								
18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:											

21. STANDARD FORM 52 REMARKS
[Handwritten mark]

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL	J.C.D.	4 June	
E.			

F. APPROVED BY
Orville C. Dawson 4 June 1953

Mr. James S. Woods

25

1 June 1953

Washington, D. C.
Intel. Anal.

FI/RI

GS-4
GS-5

BV-469.08
GS-4

BV-469.08
GS-5

High School Graduate, 2 years of Business College

Treasury Dept., Accounting Clerk, GS-2, May 1950 to Jan. 1952
GS-3, Jan. 1952 to April 1952

OSO/RI, File Section, File Clerk, GS-3, 21 April 1952 to 17 Aug. 1952
GS-4, 17 Aug. 1952 to 16 March 1953
DDP/FI/RI, Consolidation Section, Mail & File Clerk, GS-4, 16 March 1953 to present


Chief, RI

STANDARD FORM 52
 GROUP 5-12 BY THE
 U. S. CIVIL SERVICE COMMISSION
 REGISTRY NO.—FEDERAL PERSONNEL
 MANUAL CHAPTER 5

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
 If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname) James S. Woods		2. DATE OF BIRTH 20 Feb 1928		3. REQUEST NO.		4. DATE OF REQUEST 15 Apr 53	
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment				6. EFFECTIVE DATE A. PROPOSED:		7. C. S. OR OTHER LEGAL AUTHORITY	
8. POSITION (Specify whether establish, change grade or title, etc.)				B. APPROVED: <i>26 Apr 53 JSA</i>			

FROM— Mail & File Clerk BV-364.08 GS-4-305 \$3175.00 pa DDP/FI/RI Processing & Records Branch Consolidation Section Washington, D.C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		8. POSITION-TITLE AND NUMBER 9. SERVICE, GRADE, AND SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS 12. FIELD OR DEPARTMENTAL		TO— Intel. Anal. BV-469.08-4 GS-4-132 \$3175.00 pa DDP/FI/RI Processing & Records Branch Consolidation Section Washington, D.C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	
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A. REMARKS (Use reverse if necessary)
Position BV-364.08 has been deleted from the T/O.

9. REQUESTED BY (Name and title) JOHN M. SCOTT, Chief, RI		10. REQUEST APPROVED BY Signature: <i>Edward C. McManus</i> Title: <i>Asst. FI/PO</i>	
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)			

13. VETERAN PREFERENCE				14. POSITION CLASSIFICATION ACTION				
NONE	WWII	OTHER	S.P.F.	15. POINT	FEW	VICE	L.A.	REAL
				DICAS	OTHER			

16. SEX	16. RACE	17. APPROPRIATION FROM: <i>11X21.00</i> <i>2319-W</i> TO: <i>2319-20</i>	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFIDAVIT'S (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
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21. STANDARD FORM 50 REMARKS
[Handwritten signature]

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS:
A.			
B. CEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	<i>OCB</i>	<i>20 Apr 53</i>	
E.			

F. APPROVED BY
Orville E. Dawson 20 Apr 1953

STANDARD FORM 52
 FORMS ISSUED BY THE
 U. S. CIVIL SERVICE COMMISSION
 JANUARY 1953 - FEDERAL PERSONNEL
 MANUAL, CHAPTER 19

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
 If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr.-Miss-Mrs.-One given name, initials, and surname) James S. Woods		2. DATE OF BIRTH 20 Feb 1928		3. REQUEST NO.		4. DATE OF REQUEST 2 March 53	
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment				6. EFFECTIVE DATE & PROPOSED:		7. C.S. OR OTHER LEGAL AUTHORITY	
8. POSITION (Specify whether establish, change grade or title, etc.)				9. APPROVED: <i>W. J. ...</i>			
FROM-		10. POSITION TITLE AND NUMBER		TO-		11. POSITION CLASSIFICATION ACTION	
File Clerk BV-356		10. SERVICE, GRADE, AND SALARY		Mail & File Clerk BV-364.08		11. NEW VICE I.A. REAL	
GS-4-305 \$3175.00 pa.		10. ORGANIZATIONAL DESIGNATIONS		GS-4-305 \$3175.00 pa.		11. CLAIMED <input type="checkbox"/> PROVED <input type="checkbox"/>	
DD/P/PI/RI Processing & Records Branch File Section Washington, D.C.		11. HEADQUARTERS		DD/P/PI/RI Processing & Records Branch Consolidation Section Washington, D.C.		12. LEGAL RESIDENCE STATE:	
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL			
A. REMARKS (Use reverse if necessary) From BV-356 to BV-364.							
D. REQUESTED BY (Name and title) JOHN M. SCOTT, Chief, RI				D. REQUEST APPROVED BY Signature: <i>Edward C. McParsons</i>			
E. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)				Title: <i>Dir. FI/RO</i>			
13. VETERAN PREFERENCE				14. POSITION CLASSIFICATION ACTION			
NONE WWI POTMIA S.P.T. 10 POINT CHAS. OTHER				NEW VICE I.A. REAL			
15. SEX		16. RACE		17. APPROPRIATION FROM: TO:		18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)	
				<i>11/2/50 2309-20</i>		19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	
20. STANDARD FORM 50 REMARKS							
22. CLEARANCES		INITIAL OR SIGNATURE		DATE		REMARKS	
A.							
B. CEIL. OR POS. CONTROL							
C. CLASSIFICATION							
D. PLACEMENT OR ENPL.							
E.							
F. APPROVED BY <i>James H. Pr...</i> 3/6/53							

PERSONNEL ACTION REQUEST				REGISTER NO.
NAME James S. Woods		REQUESTED EFFECTIVE DATE 17 Aug 52		
NATURE OF ACTION Promotion		WHEN LEAVING (VOUCHERED) LAST WORKING DAY: EMPLOYEE'S SIGNATURE:		
FROM		TO		
TITLE File Clerk X-39.04		File Clerk X-102.22		
GRADE AND SALARY GS-3-305 \$2950.00 per annum		GS-4-305 \$3175.00 per annum		
OFFICE OSO		OSO		
DIVISION RI		RI		
BRANCH AND SECTION Processing & Records Branch File Section		Analysis & Operations Branch Service & Correspondence Section		
OFFICIAL STATION Washington, D.C.		Washington, D.C.		
DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		
REMARKS: From X-39.04 to X-102.22 Subject has been in grade since 21 April 1952. Approved: <i>John M. Leidy</i> 31 July 52 Chief, RI				
RECOMMENDED: <i>John M. Leidy</i> 4-25-52 SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF OR ADEL OFFICER				
FOR USE OF PERSONNEL ONLY				
PLACEMENT DATE QUALIFICATIONS APPROVED		TRANSACTIONS AND RECORDS APPROPRIATION: 11X2100 ALLOTMENT: 2309-00 C. S. AUTHORITY: <i>John A. B. 116</i> DATE SIGNATURE: 8-14-52 M. Leidy		
CLEARANCE REQUESTED DATE TYPE		CLEARANCE APPROVED DATE TYPE		
CLASSIFICATION BUREAU NO. U. S. C. NO. DATE APPROVED		PERSONNEL RELATIONS DATE SIGNATURE		
NEW VICE I. A. REAL		APPROVALS DATE SIGNATURE OF EXECUTIVE		
EFFECTIVE DATE 8/13/52 <i>Thomas M. Keith</i>		DATE SIGNATURE OF DIVISION CHIEF 7 Aug 52 <i>John M. Leidy</i>		

18. To: RELEASING ORGANIZATION—You are requested to furnish promptly the leave data on

file

From 11 May 1950 to 19 April 1952
Fiscal Acct. Clerk GS - 3 \$2950.00 per annum
SUPERVISOR: Miss Ryan
U.S. Treasury Department
Pennsylvania Avenue
Washington, D.C.
PLEASE FORWARD FILE AND LEAVE RECORD TO:

WOODS, JAMES S.
(NAME OF EMPLOYEE)

NOTE
If this address is not the correct one to which future inquiries should be mailed, be sure to insert the correct address under item 20a.

FOLD HERE FOR MAILING
IN WINDOW ENVELOPE

16-61936-1

22. Return to: EMPLOYING ORGANIZATION

FORWARD OFFICIAL PERSONNEL FOLDER TO
R. H. J. HOPKINS,
CENTRAL INTELLIGENCE AGENCY
2425 C STREET, N.W.
WASHINGTON 25, D.C.

To: RELEASING ORGANIZATION—You are requested to furnish promptly the leave data on

FROM 11 May 1950 to April 1952
Fiscal Acct. Clerk GS 3 \$2950.00
U.S. Treasury Dept.
15th & Penna. Ave N.W.
Washington D.C.

JAMES S. Woods
(NAME OF EMPLOYEE)

NOTE
If this address is not the correct one to which future inquiries should be mailed, be sure to insert the correct address under item 18a.

FOLD HERE FOR MAILING
IN WINDOW ENVELOPE

16-61936-2 GPO 11

Return to: EMPLOYING ORGANIZATION

George E. Helson
2430 E Street N.W.
Washington D.C.

BY 1150 was forwarded by your office
in May 1952. Since this copy has been
detached from our files it is re-
quested that you forward a copy of
same to the address at left.

17 P.S.L.

Lee

ENTRANCE ON DUTY NOTICE	
1. TO OSO NY	2. DATE 21 April 1952
Notice of Final Processing of Applicant for Entrance on Duty	
3. NAME JAMES E. Woods	4. ENTRANCE SALARY \$2950.00
5. TITLE T - File Clerk	6. GRADE GS - 3
<p>The applicant named in item 3 above meets all standards for full employment with CIA. Signed clearance for entrance on duty has been received from Inspection and Security and made a part of the personnel file of this individual. Effective this date he/she is assigned to duty with your office.</p> <p><i>File - 26 March 1952</i> <i>Iss. - 23 April at 1:00 P.M.</i></p> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>POSTED APR 30 1952</p> </div> <p>Frank C. Jarman <i>ucd</i> PERSONNEL OFFICER</p>	

FORM NO. 57-114
JAN 1952

Date APR 4 1952

MR. JAMES WOODS
3605 MINN. AVE, SE
CITY

Dear MR WOODS,

Your employment has been approved by this Agency at \$ 2950 per annum, subject to the satisfactory completion of additional processing on the day you enter on duty. It is requested that you report to the Receptionist, East End of Temporary "I" Building located at 17th and Independence Avenue, S. W., at 8:30 a.m. as soon as possible.

Please advise Mrs. Brown, 2430 "B" Street, N. W., by telephone, Executive 6115, Extension 3693 of your exact reporting date.

Sincerely yours,

EJS APR 4 - 1952
FRANK S. JAREMA
Personal Division

Subject telephoned: 4-5-52 ; spoke with EJS
(date)

Subject will EOD 21 Apr 52 - New W/Treasury

SUBJECT WILL NOT EOD; Reason:

Release - Attached

*Not met
4/8*

CENTRAL INTELLIGENCE AGENCY
2430 E STREET NW.
WASHINGTON 25, D. C.

22 March 1952

Mr. James S. Woods
3505 Minnesota Avenue, S. E.
Washington, D. C.

Dear Mr. Woods:

In reference to your application for employment, this letter is to assure you that the processing of your papers as a GS-3, \$ 2950 per annum is being continued by this agency. A definite offer of employment cannot be made, however, until such time as all processing has been completed.

The processing is a rather lengthy one; but when further information is available, we shall get in touch with you immediately.

In the meantime, it would be appreciated if you would advise us of any change in your present status, such as change of address, etc.

Your continued interest and patience are appreciated.

Very truly yours,

FRANK G. JAMES
Personnel Division

OUTGOING CLASSIFIED MESSAGE

PAGE NO

CENTRAL INTELLIGENCE AGENCY

DATE: 5 Mar 52	ROUTINE <input type="checkbox"/>	PRIORITY <input type="checkbox"/>	URGENT <input type="checkbox"/>
FROM: PDC	(ORIGINATING OFFICER)		(PHONE EXTENSION)
TRANSMIT TO: MR. JAMES WOODS 2817 CONNECTICUTT AVE., N. W. WASHINGTON, D. C.	<i>re new address on route sheet</i>		
	(CLASSIFICATION)		

TYPE IN CAPITAL LETTERS, DOUBLE SPACED

TELEGRAM - NIGHT LETTER

EMPLOYMENT APPROVED THIS AGENCY \$ 2750 PER ANNUM, SUBJECT SATISFACTORY COMPLETION OF ADDITIONAL PROCESSING. DESIRE REPORT SOONEST POSSIBLE RECEPTIONIST, EAST END TEMPORARY "I" BUILDING, 17TH AND INDEPENDENCE AVENUE, SOUTHWEST, WASHINGTON, D. C. AT 8:30 A.M. ADVISE MRS. BROWN 2430 "E" STREET NORTHWEST, BY COLLECT NIGHT LETTER OR COLLECT PHONE, EXECUTIVE 6115, EXTENSION 3698 THE EXACT REPORTING DATE.

*Do now a
98-3 (realt PHS)
won't take a
98-2
for
8 March*

Frank G. Jarema
FRANK G. JAREMA

RELEASING OFFICER

COORDINATING OFFICERS

AUTHENTICATING OFFICER

CLASSIFICATION

CENTRAL INTELLIGENCE AGENCY
2430 E STREET NW.
WASHINGTON 25, D. C.

20 February 1952
In reply refer to ED-4

Mr. James Woods
2317 Conn. Avenue N. W.
Washington D. C.

Dear Mr. Woods:

This is to advise that actual processing of your application for employment with this Agency has been initiated. Specific details as to the type of appointment and salary will be contained in subsequent correspondence. Please direct all future correspondence to the undersigned.

If applicable, the attached form should be completed and returned within two weeks. Thank you for your prompt attention to this matter.

Very truly yours,


Personnel Division

Enclosure

2 37-92
1 Append
1 PMS

Please forward three passport size photographs at your earliest convenience.

m d

CERTIFICATE OF ATTENDANCE

I certify that on APR 28 1952 I have attended
(DATE)
the Agency Indoctrination Course specified by Regulation
25-1.

James S. Woods

(NAME)

APR 30 1952

FORM NO. 51-121
DEC 1951

(6)

384

FORM NO. 57-115
MAY 1950

*File
WD*

TO: Medical Division
FROM: Transactions & Records
SUBJECT: Woods., James S.

Request that above named subject be given a physical examination.

POSITION: File Clerk

GRADE: GS - 3

BRANCH: OSO RI

SERVICE: SEPT.

NATURE OF APPOINTMENT:

EXC.

OK
[Signature]
BETTY DACEY
ILLG.

FORM NO. 57-115
MAY 1950

PERSONNEL ACTION REQUEST				REGISTER NO.
NAME James S. Woods		REQUESTED EFFECTIVE DATE APR 21 1952		
NATURE OF ACTION Excepted Appointment		WHEN LEAVING (VOUCHERED) LAST WORKING DAY: EMPLOYEE'S SIGNATURE:		
FROM		TO		
TITLE		File Clerk I-39.04 - 2		
GRADE AND SALARY		GS-305-7 \$2950.00		
OFFICE		OSO		
DIVISION		RI		
BRANCH AND SECTION		Processing and Records Branch File Section		
OFFICIAL STATION		Washington, D.C.		
DEPARTMENTAL <input type="checkbox"/> FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		
REMARKS: (To P-39.04) gw				
Approved: <i>John M. Scott</i> Chief, RI 15 FEB 1952				
RECOMMENDED: <i>15 Feb 52</i> <i>James S. Woods</i> DATE SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF, OR WORK OFFICER				
FOR USE OF PERSONNEL ONLY				
PLACEMENT		TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED		APPROPRIATION 2123400		
<i>James H. Powell</i>		ALLOTMENT 3009		
CLEARANCE REQUESTED		C. S. C. AUTHORITY Sch A.C. 116 (B)		
DATE	TYPE	DATE	TYPE	
DATE	SIGNATURE		DATE	SIGNATURE
				<i>Margaret P. Osany</i>
CLASSIFICATION		PERSONNEL RELATIONS		
BUREAU NO.	C. S. C. NO.	DATE APPROVED	DATE	SIGNATURE
				<i>Jan 2</i>
FLW	VICE	L.A.	REAL	APPROVALS
				DATE
DATE	SIGNATURE		DATE	SIGNATURE OF EXECUTIVE
<i>27 Feb</i>	<i>Wm. J. ...</i>		<i>Apr 52</i>	<i>L. ...</i>
EFFECTIVE DATE				

REQUEST FOR SECURITY CLEARANCE				REQUEST NO.	
				H-3007A	
				DATE	
				10 FEBRU 52	
FULL NAME (Last)		(First)		(Middle)	
POOLS,		JAMES		CANNON	
POSITION TITLE				YEAR OF BIRTH	
FILE CLERK				1928	
LOCATION (OFFICE)		GRADE		CODE	
DCO		GS-3		1000	
GEOGRAPHIC DESTINATION (CITY AND STATE OR COUNTRY, AS APPROPRIATE)		DIVISION		BRANCH	
A. H. J. C.		IT		SEC. SEC	
TYPE OF EMPLOYEE					
1. <input checked="" type="checkbox"/> REGULAR 2. <input type="checkbox"/> CONTACT 3. <input type="checkbox"/> CONSULTANT 4. <input type="checkbox"/> MILITARY					
5. <input type="checkbox"/> OTHERS					
FUNDS					
<input checked="" type="checkbox"/> VOUCHERED <input type="checkbox"/> UNVOUCHERED					
TYPE(S) OF SECURITY CLEARANCE REQUESTED					
<input checked="" type="checkbox"/> PROVISIONAL FOR: (show name of pool or group)					
<input checked="" type="checkbox"/> SECRET					
<input checked="" type="checkbox"/> FULL					
<input type="checkbox"/> WAIVER					
D ST. POOL					
AVAILABILITY DATE (Mo-No-Yr)		EST. CLEARANCE DATE (Mo-Yr)		RECRUITMENT SOURCE	
SEX AND VETERAN STATUS					
1. <input checked="" type="checkbox"/> M-V 2. <input type="checkbox"/> M-NV 3. <input type="checkbox"/> F-V 4. <input type="checkbox"/> F-NV					
REMARKS:					
SECURITY INITIATED BY NORTH. SUSPENDED ACTION OF 1/5/52. CHIEF OF OFFICE, DIVISION & BRANCH.					
Attachments:					
FIS		FRANK O. JAMES			
Append. I		SIGNATURE			
Photos		DIVISION			

Office Memorandum • UNITED STATES GOVERNMENT

TO : *Jarema*
FROM :
SUBJECT: WOODS, JAMES

DATE: 8 Feb. 1952

In process as GS 2 Clerk. He wants accounting clerk eventually, but there are no openings at present, & we have two other - better qualified - accounting clerks in process in reserve at present.

Possibility for microfilm trainee?

M. Langford

P.O.
12-26

MP

2817 Sonn. Ave. N.Y.

January 12, 1952

Dear Sir:

I received your letter dated January 5, stating that I was to inform you of any changes in my present status.

I am now a grade GS 2 with an one year increase. I am now being considered for a grade GS 3 in the Treasury Dept. I assure you, this does not lessen my zeal to get in the C.I.A.

I would like to know if your Agency would transfer or consider me for appointment at a grade GS 3.

Sincerely yours,

James Shields

REQUEST FOR SECURITY CLEARANCE					REQUEST NO.
					DATE 7-20-57
FULL NAME (Last)	(First)	(Middle)	YEAR		MONTH
MOSES	JAMES	DAVID	1908		11/52
POSITION TITLE			GRADE	CODE	
Chief			GS-8	3008	
LOCATION (OFFICE)	CODE	DIVISION	CODE	BRANCH	CODE
Personnel		Personnel (0)		Personnel Pool	
GEOGRAPHIC DESTINATION (CITY AND STATE OR COUNTRY, AS APPROPRIATE)					
Washington, D. C.					
TYPE OF EMPLOYEE					
1. <input type="checkbox"/> OTHER					
2. <input checked="" type="checkbox"/> REGULAR					
3. <input type="checkbox"/> CONTACT					
4. <input type="checkbox"/> CONSULTANT					
5. <input type="checkbox"/> MILITARY					
FUNDS					
1. <input type="checkbox"/> VOUCHERED					
2. <input type="checkbox"/> UNVOUCHERED					
TYPE(S) OF SECURITY CLEARANCE REQUESTED					
1. <input checked="" type="checkbox"/> PROVISIONAL FOR: (Show name of pool or group)					
D. Street Pool					
2. <input type="checkbox"/> SECRET					
3. <input type="checkbox"/> FULL					
4. <input type="checkbox"/> WAIVER					
AVAILABILITY DATE (Mo-No-Yr)	EST. CLEARANCE DATE (Mo-Yr)	RECRUITMENT SOURCE			CODE
					01
SEX AND VETERAN STATUS					
1. <input checked="" type="checkbox"/> M-V					
2. <input type="checkbox"/> M-NV					
3. <input type="checkbox"/> F-V					
4. <input type="checkbox"/> F-NV					
REMARKS:					
<i>Memo 1-17-52</i>					
Attachments:					
FHS					
Append, I					
Photos.					
CONFIDENTIAL				JOSEPH D. RAGAN <i>co</i>	
				Chief, Personnel Division	
				DIVISION	

5 January 1952

Mr. James S. Woods
2017 Conn. Ave. N. W.
Washington, D. C.

Dear Mr. Woods:

You are being considered for employment with the Central Intelligence Agency at grade GS-2, salary ~~62750.00~~ per annum.

The appointment, if offered, will be temporary indefinite in nature. Processing procedures require about 30 days to complete. Unless you are notified to the contrary during this period, you may assume that you are being actively considered for employment. Upon completion of this processing, we will contact you immediately.

In the meantime, it would be appreciated if you will keep us advised of any changes in your present status, such as change of address, etc.

Please let us know immediately if during the interim you find that you will not be able to accept employment with this organization.

Very truly yours,

Joseph E. Ragan *JER*
Chief, Personnel Division

~~CONFIDENTIAL~~
 REQUEST FOR SECURITY CLEARANCE
 SECURITY INFORMATION

REQUEST NO. _____
 DATE **4 JAN. 1952**

FULL NAME (Last) (First) (Middle)
WOODS, JAMES SAUVIE YEAR OF BIRTH **1928**

POSITION TITLE **CLERK** GRADE **GS2** CODE _____

LOCATION (OFFICE) **POOL** CODE _____ DIVISION _____ CODE _____ BRANCH _____ CODE _____

GEOGRAPHIC DESTINATION (CITY AND STATE OR COUNTRY, AS APPROPRIATE) _____

TYPE OF EMPLOYEE 1. REGULAR 2. CONTACT 3. CONSULTANT 4. MILITARY
 5. OTHER:

FUNDS VOUCHERED UNVOUCHERED

TYPE(S) OF SECURITY CLEARANCE REQUESTED
 PROVISIONAL FOR: (show name of pool or group)
 SECRET
 FULL
 WAIVER

AVAILABILITY DATE (Mo-No-Yr) **exp** EST. CLEARANCE DATE (Mo-Yr) _____ RECRUITMENT SOURCE _____ CODE **01**

SEX AND VETERAN STATUS 1. M-V 2. M-NV 3. F-V 4. F-NV

REMARKS:

89 to Med. Sec
 Attachments: **1/5**
 FHS _____
 Append. I _____
 Photos. _____

CONFIDENTIAL
 SECURITY INFORMATION

 SIGNATURE

 DIVISION

Office Memorandum • UNITED STATES GOVERNMENT

TO : File

DATE: 3 January 1952

FROM :

SUBJECT: James S. Woods

1. Contacted Treasury Dept. this date and Employee Relations Officer stated that subject had no efficiency ratings since he had not been there long enough before being granted military furlough and after his discharge. However, she stated that Mr. Woods had been a very satisfactory employee and there was nothing derogatory in his file.

L. E. BLAIS

CONFIDENTIAL

REPORT OF INTERVIEW		THIS DATE 18 Dec. 51
NAME James Savvie Woods		REFERRED BY
HOME ADDRESS 2817 Conn. Ave., N. W. Wash., D. C.		TELEPHONE AD 8130
BUSINESS ADDRESS Treasury		TELEPHONE EX 6400 x2612
DATE OF BIRTH 2:20:1928	PLACE OF BIRTH Forest River, N. D.	CITIZENSHIP (HOW ACQUIRED) US
NAME OF SPOUSE none - no expectations		
DATE OF BIRTH	PLACE OF BIRTH	CITIZENSHIP (HOW ACQUIRED)
SALARY REQUESTED GS-2	NO. OF DEPENDENTS none	INTERVIEWER WM. J. BINGHAM
EDUCATION (SCHOOLS, DEGREES, DATES, MAJORS, EXTRA-CURRICULAR ACTIVITIES)		
Hadlich's Bus. Sch. Diploma in fr. accounting		
MAJOR EMPLOYMENT HISTORY (PRINCIPAL OCCUPATION, SPECIAL SKILLS, SALARY LEVELS)		
Present - Treasury Dept. I/A attached		
MILITARY OCCUPATION (RANK, SERIAL NO., DATES OF SERVICE, DUTIES AND AREAS)		
Oct 3, 1946 Apr 12, 1948		
Oct 19, 1950 Aug 7, 1951		
Pfc (Infantry)		

CONFIDENTIAL

AREA KNOWLEDGE (RESIDENCE OR STUDY)

Japan, Korea (US Army) No 10-9

LANGUAGE FACILITY

None

EVALUATION AND RECOMMENDATIONS (BE COMPLETE AND JUSTIFY DECISIONS, NOTE ANY UNFAVORABLE CIRCUMSTANCES.)

A CLEAN CUT, BRIGHT EYED, EAGER YOUNGSTER, VERY AMBITIOUS BUT HAS HAD LIMITED EXPERIENCE. HE WOULD LIKE TO GET INTO ACCOUNTING, BUT HE HAS HAD ONLY BASIC ACCOUNTING AND HAS NEVER HAD A JOB IN ACCOUNTING TO TEST HIM. HE IS WILLING TO TAKE A CLERK JOB IF HE WILL GET A ^{CHANCE} CLEARANCE AT ACCOUNTING. WILL GO O/S. FEELS HE IS BLOCKED IN HIS JOB IN TREASURY DEPT. SINCE HE WILL COME AS A GS-2, I WOULD TAKE A CHANCE ON HQ HIM IF HIS TESTS SHOW ANYTHING ENCOURAGING. HE EXPECTS TO ENTER STRAYERS COLLEGE OF ACCOUNTING (NIGHT) IN FEBRUARY. DOES NOT DESIRE POOL. SUGGEST MISS MC KENNEY LOOK HIM OVER. FORMS ATTACHED. HAS BEEN SCHEDULED FOR GS-1 CLERK-ACCT. TEST ON 20 DECEMBER.

FORMS GIVEN: PHS MEDICAL RESERVE

WILLIAM J. BINGHAM
SIGNATURE OF INTERVIEWER

CONFIDENTIAL

MEMORANDUM TO: Personnel Division
Central Intelligence Agency
2430 "E" Street, N. W.
Washington, 25, D. C.

DEC 3 1951

SUBJECT: Availability of James S. Woods

1. This is to advise you that no objection is interposed to your consideration of the application for employment of the above-named individual who is presently employed by this office.

2. In the event this employee is accepted by your Agency, it is requested that the individual named below be contacted relative to the effective date of his ~~transfer~~ release.

J. J. Hubb
(Signature)

Acting Personnel Officer
(Title)

Bureau of Accounts
Treasury Department
(Agency)

Contact for further information:

Frances C. Murphy
(Name) Employee Relations Officer

Code 172, Extension 2628
(Telephone)

SECRET

SECRET

REPRODUCTION MASTERS

BIOGRAPHY

BIOGRAPHIC PROFILE

SECRET

Handle With Care

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE 12 May 1975	FILE NO. 2542
TO: (CC#s)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, CP	CS NUMBER 502-16-6806	
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, CP	EMPLOYEE NUMBER 010032	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) CCS	ID CARD NUMBER	
ATTN:	CHIEF ADMIN STAFF	OFFICIAL COVER	<input type="checkbox"/> ESTABLISHED <input checked="" type="checkbox"/> DISCONTINUED
REF:	VERBAL REQUEST		
SUBJECT	WOODS, James S.	UNIT	
KEEP ON TOP OF FILE WHILE COVER IN EFFECT			
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS	
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE		EFFECTIVE DATE: EOD	
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TDY _____ OTHER (Specify)		<input checked="" type="checkbox"/> SUBMIT FORM 3254 CIA W-2 TO BE ISSUED. (HNB 20-11)	
SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HNB 20-7)		<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY 2 (HNB 20-7)	
SUBMIT FORM 3254 (HNB 20-11)		EAA: CATEGORY I <input checked="" type="checkbox"/> CATEGORY II <input type="checkbox"/>	
SUBMIT FORM 1322 FOR ANY CHANGE IN COVER. (HR 240-2*)		RETURN ALL OFFICIAL DOCUMENTATION TO CCS	
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-2*)		SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD	
EAA. CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>		REMARKS AND/OR COVER HISTORY	
SUBMIT FORM 1322 FOR ANY CHANGE IN COVER. (HR 240-2*)		Apr52-Aug54 IIQS/Overt	
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-2*)		Aug54-Nov56 Korea and Japan/DAC	
EAA. CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>		Nov56-Aug57 IIQS/Overt	
SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD		Aug57-Feb59 Philippines/DAFC	
REMARKS AND/OR COVER HISTORY		Feb59-Mar61 IIQS/DAPC	
Apr52-Aug54 IIQS/Overt		Mar61-Jan67 Japan/DAC	
Aug54-Nov56 Korea and Japan/DAC		Jan67-Oct68 IIQS/STATE-NOM	
Nov56-Aug57 IIQS/Overt		Oct68-Nov70 London/DAC	
Aug57-Feb59 Philippines/DAFC		Nov70-Jun71 IIQS/DAC	
Feb59-Mar61 IIQS/DAPC		Jun71-Aug73 Rome-STATE-NOM	
Mar61-Jan67 Japan/DAC		Aug73 Present Overt	
Jan67-Oct68 IIQS/STATE-NOM		COPY 1 - CD OF CPU	
Oct68-Nov70 London/DAC		COPY 2 - OPERATING COMPONENT	
Nov70-Jun71 IIQS/DAC		COPY 3 - OS/SRACD	
Jun71-Aug73 Rome-STATE-NOM		COPY 4 - OC-OO/TED	
Aug73 Present Overt		COPY 5 - CCS-FILE	
EDF:JP		<i>G. A. Christ</i>	
CHIEF, OFFICIAL COVER BRANCH, COVER AND CONFIDENTIAL STAFF			

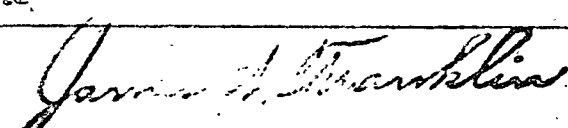
THIS MEMO MUST REMAIN ON TOP OF FILE

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		FILE NO.
TO: (Check)	CHIEF, CONTROL DIVISION, OP	SS NUMBER
	CHIEF, CONTRACT PERSONNEL DIVISION, OP	EMPLOYEE NUMBER
	CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER
ATTN:	OFFICIAL COVER	ESTABLISHED
REF:		DISCONTINUED
SUBJECT	UNIT	
KEEP ON TOP OF FILE WHILE COVER IN EFFECT		
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE _____		EFFECTIVE DATE: _____
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TO _____		SUBMIT FORM 3254 TO BE ISSUED (NR 20-11)
SUBMIT FORM 642 FOR ANY CHANGE AFFECTING THIS COVER. (NR 20-7)		SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (NR 240-20)
SUBMIT FORM 3254 TO BE ISSUED. (NR 20-11)		SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (NR 240-20)
EAA, CATEGORY I		DO NOT WRITE IN THIS BLOCK
EAA, CATEGORY II		
SUBMIT FORM 2600 FOR HOSPITALIZATION CARD		
REMARKS AND/OR COVER HISTORY		
DISTRIBUTION: COPY 1 - CD OR CPO COPY 2 - OPERATING COMPONENT COPY 3 - OS/SHACO COPY 4 - GL/TFB COPY 5 - CCS-FILE		RETURN ALL OFFICIAL DOCUMENTATION TO CCS SUBMIT FORM 2689 FOR HOSPITALIZATION CARD.

Janice J. Franklin
CHIEF, OFFICIAL COVER; CENTRAL COVER STAFF

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE
		10 May 1971
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION	FILE NUMBER
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	2542
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action)	EMPLOYEE NUMBER
		010032
		ID CARD NUMBER
		EUR
ATTN:	EUR/Chief Support Staff	OFFICIAL COVER
REF:	Form 1413 dated 6 May 1971	<input checked="" type="checkbox"/> BACKSTOP ESTABLISHED
		<input type="checkbox"/> DISCONTINUED
SUBJECT	WOODS, James S.	UNIT
		Department of State
KEEP ON TOP OF FILE WHILE COVER IN EFFECT		
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS (OPM 20-800-11)		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS (OPM 20-800-11)
A. TEMPORARILY FOR _____ DAYS		DATE
EFFECTIVE DATE _____		
B. CONTINUING AS OF From EOD		
<input checked="" type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HRB 20-7)		<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HRB 20-7)
<input checked="" type="checkbox"/> ASCERTAIN THAT State _____ W-2 BEING ISSUED. (HRB 20-12)		<input type="checkbox"/> RETURN ALL OFFICIAL DOCUMENTATION TO CCS.
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR-240-20)	DO NOT WRITE IN THIS BLOCK - FOR CCS INTERNAL USE ONLY	
<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR-240-20)		
<input type="checkbox"/> SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD		
REMARKS AND/OR COVER HISTORY		
<p>Apr 52 - Aug 54 - Headquarters - Overt Aug 54 - Nov 56 - Korea/Japan - DAC Nov 56 - Aug 57 - Headquarters - Overt Aug 57 - Feb 59 - Philippines - DAFG Feb 59 - Mar 61 - Headquarters - DAFG Mar 61 - Jan 67 - Japan - DAC Jan 67 - Oct 68 - Headquarters - Nom State Oct 68 - Nov 70 - London - DAC Nov 70 - Juno 71 - Headquarters - DAC June 71 - Romo - Nom State</p>		
DISTRIBUTION: COPY 1 - CD COPY 2 - OPERATING COMPONENT COPY 3 - O/OS COPY 4 - OL/TELECOM COPY 5 - SF COPY 6 - CCS - FILE		RF:km  CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DA 17 November 1970
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, RECORDS AND CONTROL	FILE NUMBER 0542
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER 16032
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER FAO-542
ATTN: EHE/ Chief Support Staff	OFFICIAL COVER	<input checked="" type="checkbox"/> BACKSTOP ESTABLISHED <input type="checkbox"/> DISCONTINUED
REF: Form 1322		
SUBJECT WOODS, James S.	UNIT Records Analysis Group	
KEEP ON TOP OF FILE WHILE COVER IN EFFECT		
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS (OPR 20-800-11)		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS (OPR 20-800-11)
A. TEMPORARILY FOR _____ DAYS EFFECTIVE DATE COB _____		DATE (no. of COB)
B. CONTINUING AS OF COB AUG 57		
<input checked="" type="checkbox"/>	SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (RNB 20-7)	SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (RNB 20-7)
<input checked="" type="checkbox"/>	ASCERTAIN THAT <u>Army</u> W-2 BEING ISSUED. (RNB 20-11)	RETURN ALL OFFICIAL DOCUMENTATION TO CCS.
<input checked="" type="checkbox"/>	SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR-240-2a)	DO NOT WRITE IN THIS BLOCK - FOR CCS INTERNAL USE ONLY
<input checked="" type="checkbox"/>	SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR-240-2a)	
<input type="checkbox"/>	SUBMIT FORM 2808 <input checked="" type="checkbox"/> FOR HOSPITALIZATION CARD	
DATES AND/OR COVER HISTORY		
Apr 52-Aug 54 Hqs Overt Aug 54-Nov 56 Korea and Japan DAC Nov 56-Aug 57 Hqs Overt Aug 57-Feb 58 Philippines DAPC Feb 58-Mar 61 Hqs DAPC Mar 61-Sep 64 Japan DAC and DAPC Sep 64-Jan 67 Hqs State Hon. Jan 67-Oct 68 Vietnam State Hon. Oct 68-Nov 70 England DAC Nov 70 Hqs DAC		
DISTRIBUTION: COPY 1 - HQ COPY 2 - OPERATING COMPONENT COPY 3 - 3000 COPY 4 - 3000 COPY 5 - 3000 COPY 6 - 3000 COPY 7 - 3000		<i>James H. Franklin</i> CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF

1551

SECRET

112 20-431

SECRET

6 Mar 59

File: 2542

MEMORANDUM FOR: Chief, Records and Services Division
Office of Personnel

SUBJECT: James Sawie WOODS

1. Cover arrangements ~~have been completed~~ have been completed for the above-named Subject.
2. Effective as 5 Mar 1959, it is requested that your records be properly blocked ~~to deny~~ to deny ~~Subject's~~ Subject's current Agency employment to an external inquirer.
3. This memorandum confirms an oral request of 6 Mar 59 by Mr. E. C. Davies, Room 1608 "L" Building, Extension 2420.

Paul P. Stewart
for HARRY W. LITTLE, JR.
Chief, Central Cover Division

cc: SSD/OS

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED
DATE 10-13-01 BY 60322 UCBAW/STP

SECRET REMAIN

FORM 1580a
UN FILE

(4-13-40)

SECRET

DEC 5 1956
(Date)

MEMORANDUM FOR: Chief, Records & Services Division
Office of Personnel

THROUGH : Security Support Division
Office of Security

SUBJECT : James S. WOODS

1. Cover arrangements have been completed for the above named subject who will be visiting a foreign country for a _____ day TDY trip.

2. Effective this date, it is requested that your records be properly ~~closed~~ (re-opened) to ~~allow~~ (acknowledge) subject's current Agency employment by an external inquirer.

Edward J. Boston
JOSEPH W. ADAMS
Chief, Official Cover & Liaison, CCB

CC: SSD/CS

THIS INFO MUST REMAIN
ON TOP OF FILE
SECRET

JPS
12-11-56

SECRET
(When Filled In)

unable to locate

RMR 080878

NOTIFICATION OF PERSONNEL ACTION

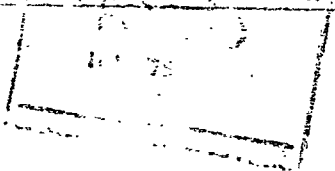
OFF		1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)	
010032		WOODS JAMES S			
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE	
RETIREMENT (VOLUNTARY) UNDER CIA RETIREMENT AND DISABILITY SYSTEM				08 04 78	
5 CATEGORY OF EMPLOYMENT				REGULAR	
6 FUNDS		7-TAN AND NSCA		8. CSC OR OTHER LEGAL AUTHORITY	
V TO V		V TO CF			
CF TO V		CF TO CF			
9 ORGANIZATIONAL DESIGNATIONS				10 LOCATION OF OFFICIAL STATION	
DDO/IMS INFORMATION MGMT AND PLANNING GROUP RECORDS MANAGEMENT BRANCH AREAS UNIT				8026 3430 0000 PL 88-643 SEC 233 WASH., D.C.	
11 POSITION TITLE				12 POSITION NUMBER	
RECORDS ADMIN OFF NE				CG45	
14 CLASSIFICATION SCHEDULE (GS, WS, etc.)				15 OCCUPATIONAL SERIES	
GS				0344.01	
16 GRADE AND STEP				17 SALARY OR RATE	
13 2				26889	
18 REMARKS					

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

9 ACTION CODE		20 Employ Code		21 OFFICE CODING		22 STATION CODE		23 INTEGRATED CODE		24 REGIONS CODE		25 DATE OF SERV		26 DATE OF GRADE		27 DATE OF LET	
45		10		NUMERIC ALPHABETIC		CODE		CODE		CODE		MO DA YR		MO DA YR		MO DA YR	
28 NTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 Correction/Conciliation Data		33 SECURITY REQ NO		34 SEX					
MO DA YR		CSC CIA ACA NONE		CODE		OB10000		EOD DATA									
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39. FEHQS - HEALTH INSURANCE		40 SOCIAL SECURITY NO							
CODE		MO DA YR		MO DA YR		CAB EBY CODE CODE		CODE B NUMBER HEALTH INS CODE									
0 - NONE 1 - 5 PT 2 - 10 PT						PROV UN-AP		1 YES 2 NO									
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT CODE				43 FEDERAL TAX DATA				44 STATE TAX DATA					
CODE				CODE				FORM EXECUTED				STATE CODE					
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								1 - YES 2 - NO				FORM EXECUTED 1 - YES 2 - NO					

SIGNATURE OR OTHER AUTHENTICATION

JLS



153078

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SIGNAL NUMBER 010032		2. NAME (LAST FIRST MIDDLE) WOODS JAMES S	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE MO DA YR 04 09 78	
5. CATEGORY OF EMPLOYMENT REGULAR		6. CSC OR OTHER LEGAL AUTHORITY	
7. PAN AND NSCA 8026 3430 0000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS DDO/IMS INFORMATION MGMT AND PLANNING GROUP RECORDS MANAGEMENT BRANCH AREAS UNIT		10. LOCATION OF OFFICIAL STATION WASH., D.C.	
11. POSITION TITLE RECORDS ADMIN OFF NE		12. POSITION NUMBER CG45	
13. SERVICE DESIGNATION DCC		14. CLASSIFICATION SCHEDULE (GS, WG, etc.) GS	
15. OCCUPATIONAL SERIES 0344.01		16. GRADE AND STEP 13 2	
17. SALARY OR RATE 26889		18. REMARKS	

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODES NUMERIC 53740 ALPHABETIC IMS	22. STATION CODE 75013	23. INTERSEE CODE	24. HOURS CODE 1	25. DATE OF BIRTH MO DA YR 02 20 28	26. DATE OF GRADE MO DA YR	27. DATE OF LET MO DA YR
28. DATE SEPIRE MO DA YR	29. SPN. LA. REFERENCE 1. CSC 2. CIA 3. NSCA 4. REAS	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. Correction/Correction Data TYPE MO DA YR	33. SECURITY REQ NO	34. SEA	35. SOCIAL SECURITY NO	
36. VET PREFERENCE CODE 0 NONE 1 5YR 2 10YR	37. SERV COMP DATE MO DA YR	38. LONG COMP DATE MO DA YR	39. CAREER CATEGORY CAR RESV EPOW IAWP	40. FEGLI / HEALTH INSURANCE CODE CODE 0 WAIVER 1 YES	41. FEDERAL TAX DATA FORM EXECUTED CODE 1 YES 2 NO	42. STATE TAX DATA FORM EXECUTED CODE 1 YES 2 NO	43. STATE TAX DATA CODE 11199 STATE USE	
44. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 1 NO FORFEITURE SERVICE 2 NO BREAK IN SERVICE 3 BREAK IN SERVICE LESS THAN 3 YRS 4 BREAK IN SERVICE MORE THAN 3 YRS		45. LEAVE CAT CODE	46. FEDERAL TAX DATA FORM EXECUTED CODE 1 YES 2 NO		47. STATE TAX DATA FORM EXECUTED CODE 1 YES 2 NO			

600 DATA

SIGNATURE OR OTHER AUTHENTICATION

FROM: NE

SECRET

[Handwritten Signature]

SECRET
(When Filled In)

OCF R

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER 010032		2. NAME (LAST FIRST MIDDLE) WOODS JAMES S	
3. NATURE OF PERSONNEL ACTION PROMOTION			4. EFFECTIVE DATE: MO DA YR 03 12 78
			5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS	V TO V	V TO CF	7. PAY AND NSCA
	CF TO V	CF TO CF	
8. CSC OR OTHER LEGAL AUTHORITY 8033 4800 0000 50 USC 403 J		9. ORGANIZATIONAL DESIGNATIONS DDO/NE DIVISION OFFICE OF THE CHIEF, NE DIVISION PLANS STAFF	
10. LOCATION OF OFFICIAL STATION WASH. D.C.		11. POSITION TITLE RECORDS ADMIN OFF	
12. POSITION NUMBER CG45		13. SERVICE DESIGNATION DCC	
14. CLASSIFICATION SCHEDULE (GS, WS, etc) GS	15. OCCUPATIONAL SERIES 0344.01	16. GRADE AND STEP 13 2	17. SALARY OR RATE 26889

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 46075 NE		22. STATION CODE 75013	23. INTEGRAL CODE	24. HOURS Code 1	25. DATE OF BIRTH MO DA YR 03 20 28			26. DATE OF GRADE MO DA YR 03 13 78			27. DATE OF LEI MO DA YR 03 13 78		
28. TIME EXPIRES MO DA YR		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1. CSC 2. CIA 3. NSCA 4. NDAI CODE		31. SEPARATION DATA CODE		32. CORRECTION/COMPLETION DATA TYPE MO DA YR			33. SECURITY REG NO		34. SEX		
35. PFT PREFERENCE CODE 0. NONE 1. 5.7 2. 10. PT		36. SERV COMP DATE MO DA YR		37. LONG COMP DATE MO DA YR		38. CAREER CATEGORY CAR BRN PRO/ IMP		39. FEGLI / HEALTH INSURANCE CODE CODE 0. WAIVER 1. YES			40. SOCIAL SECURITY NO				
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 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				42. LEAVE CAT CODE		43. FEDERAL TAX DATA FORM EXECUTED 1. YES 2. NO				44. STATE TAX DATA FORM EXECUTED 1. YES 2. NO					

EOO DATA

SIGNATURE OR OTHER AUTHENTICATION

100210
MAR 22 1978
jll

1 SERIAL NO		2 NAME		3 ORGANIZATION		4 FUNDS		5 LWOP HOURS		
010032		JAMES JAMES		F I S						
6 OLD SALARY RATE				7 NEW SALARY RATE				8 TYPE ACTION		
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	WGI	OSI	ADJ.
		24070	11/23/75			24799	11/20/77			
12	5			12	5					
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE <i>Auth [Signature]</i>								DATE 15 Sept 1977		
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD										
CLERKS INITIALS [Handwritten initials]										
FORM 10-73 560E Use previous editions PAY CHANGE NOTIFICATION (4 51)										

NEW 10-73 560E

LJF 110977

SECRET
(When Filled In)

OCF NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 010032		2. NAME (LAST FIRST MIDDLE) WOODS JAMES S	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND CANCELLATION OF NSCA			4. EFFECTIVE DATE MO DA YE 07 11 77
			5. CATEGORY OF EMPLOYMENT REGULAR
A. FUNDS		V TO V CF TO V	V TO CF CF TO CF
		7. PAN AND NSCA B033 4801 0000	
		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS DDO/NE DIVISION OFFICE OF THE CHIEF, NE DIVISION PLANS STAFF			10. LOCATION OF OFFICIAL STATION WASH., D.C.
11. POSITION TITLE RECORDS ADMIN OFF			12. POSITION NUMBER CG45
			13. SERVICE DESIGNATION DCC
14. CLASSIFICATION SCHEDULE (GS, WG, etc) GS		15. OCCUPATIONAL SERIES 0344.01	16. GRADE AND STEP 12 4
		17. SALARY OR RATE 24070	

18. REMARKS
THIS ACTION REFLECTS NEW LEGISLATIVE PAY INCREASE EFFECTIVE 10/09/77.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING ALPHABETIC 48075 NE	22. STATION CODE 75013	23. INTEGRITY CODE	24. HOURS CODE 1	25. DATE OF BIRTH MO DA YE 02 20 28	26. DATE OF GRADE MO DA YE	27. DATE OF LEI MO DA YE
28. DATE EXPIRES MO DA YE	29. SPECIAL REFERENCE 1. CMC 2. CWA 3. ICA 4. MONE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. Correction Cancellation Data TYPE MO DA YE		33. SECURITY REG. NO.		34. SEX
35. VET PREFERENCE CODE 0 - NONE 1 - 5 PT. 2 - 10 PT.	36. SERV. COMP DATE MO DA YE	37. LONG COMP. DATE MO DA YE	38. CAREER CATEGORY CAR BRV COM PROV IMP		39. PROJ / HEALTH INSURANCE CODE 0 - WA-VEP 1 - YES HEALTH INS CODE		40. SOCIAL SECURITY NO.	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 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)			42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1 - YES 2 - NO		44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMP STATE CODE 1 - YES 2 - NO		

FROM: **CCS** SIGNATURE OR OTHER AUTHENTICATION

POSTED
NOV 18 1977

YHL

All

L20 100 045

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12010 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

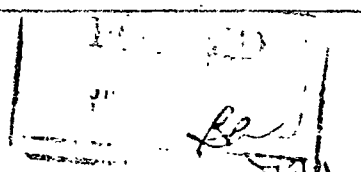
EFFECTIVE DATE OF PAY ADJUSTMENT: 09 OCTOBER 1977

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
WIGGS JAMES S	0010032	CCS	GS 12 4	\$24,070

15848

KKK: 22 JULY 76

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION												
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)										
010032		WOODS JAMES S										
3 NATURE OF PERSONNEL ACTION					4 EFFECTIVE DATE			5 CATEGORY OF EMPLOYMENT				
REASSIGNMENT - CHANGE OF HOME BASE					07 13 76			REGULAR				
6 FUNDS		V TO V		V TO CF		7. PAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY				
X						T230-0118 0002		50 USC 403 J				
9 ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION							
DDO/CCS REGISTRY					WASH., D.C.							
11. POSITION TITLE					12. POSITION NUMBER			13. SERVICE DESIGNATION				
RECORDS ADMIN OFF CH					BL44			DCC				
14. CLASSIFICATION SCHEDULE (OS, LS, GS, I)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS			0344.01		12 4		21324					
18 REMARKS												
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 INDUSTRY CODE	25 DATE OF BIRTH		26 DATE OF GRADE		27. DATE OF LET	
37	10	NUMERIC	ALPHABETIC	75013		1	MO	DA	YE	MO	DA	YE
		39115	CCS				MO	DA	YE	MO	DA	YE
28 DATE EXPIRES		29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 Correction / Connection Data			33 SECURITY REG NO	34 SEX		
MO DA YE			1. CSC 2. C.A. 3. F.C.A. 4. NCA		CODE	TYPE	MO	DA	YE	MOD DATA		
35 VET PREFERENCE	36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 FEGLI - HEALTH INSURANCE			40 SOCIAL SECURITY NO.		
CODE	1. NONE 2. 5 PT 3. 10 PT	MO DA YE	MO DA YE	CAB PROV TEMP	CODE	CODE	B. WAIVER 1. YES 2. NO	HEALTH INS CODE				
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE			42 LEAVE CAT CODE	43 FEDERAL TAX DATA			44 STATE TAX DATA					
CODE				FORM EXECUTED	CODE	PAY TAX EXEMPTIONS	FORM EXECUTED	CODE	PAY TAX EXEMPTIONS	STATE CODE		
1. NO PREVIOUS SERVICE 2. NO BIRTH IN SERVICE 3. EQUAL OR SERVICE LESS THAN 1 YES 4. EQUAL OR SERVICE MORE THAN 1 YES				1. YES 2. NO			1. YES 2. NO					
SIGNATURE OR OTHER AUTHENTICATION												
												

AEO: 13 AUG 76

SECRET
(When Filled In)

OCF NOTIFICATION OF PERSONNEL ACTION										
1. SERIAL NUMBER 010032		2. NAME (LAST FIRST MIDDLE) WOODS JAMES S								
3. NATURE OF PERSONNEL ACTION CHANGE OF FAN				4. EFFECTIVE DATE 08 09 76		5. CATEGORY OF EMPLOYMENT REGULAR				
6. FUNDS		7. PAN AND NSCA		8. CSC OR OTHER LEGAL AUTHORITY						
X V TO V CF TO V		V TO CF CF TO CF		T230 0130 0002		50 USC 403 J				
9. ORGANIZATIONAL DESIGNATIONS DDO/GCS REGISTRY				10. LOCATION OF OFFICIAL STATION WASH., D.C.						
11. POSITION TITLE RECORDS ADMIN OFF CH				12. POSITION NUMBER BL44		13. SERVICE DESIGNATION DCC				
14. CLASSIFICATION SCHEDULE (GS, 18, etc.) GS			15. OCCUPATIONAL SERIES 0344.01		16. GRADE AND STEP 12 4		17. SALARY OR RATE 21324			
18. REMARKS										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING 39115 CCS		22. STATION CODE 73013	23. INTER-AREA CODE 1	24. WAYS CODE 02 20 22		25. DATE OF BIRTH NO DA YE	26. DATE OF GRADE NO DA YE	27. DATE OF LEI NO DA YE
28. VETS EMPRES NO DA YE		29. SPECIAL REFERENCE	30. RETIREMENT DATA 1 CSC 2 CIA 3 FRA 4 SGRM		31. SEPARATION DATA CODE	32. Continuation/Continuation Basis NO DA YE		33. SECURITY REQ NO.	34. SEX	
35. PFT PREFERENCE CCCA 0 NONE 1 SW 2 GP		36. SERV COMP DATE NO DA YE		37. LONG COMP DATE NO DA YE		38. CAREER CATEGORY CAB 2 PROV EMP		39. PERS/HEALTH INSURANCE CCCA 0 NONE 1 YES 2 NO		40. SOCIAL SECURITY NO.
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CCCA 1 NO PREVIOUS SERVICE 2 NO SERV IN SERVICE 3 PREAM TO SERVICE (LESS THAN 3 YRS) 4 SERV IN SERVICE (MORE THAN 3 YRS)			42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED 1 YES 2 NO			44. STATE TAX DATA FORM EXECUTED 1 YES 2 NO			
SIGNATURE OR OTHER AUTHENTICATION										
<p>POSTED</p> <p>AUG 1976</p> <p><i>[Signature]</i></p>										

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

FORMS 01/31/76

1. SERIAL NUMBER 010052		2. NAME (LAST FIRST MIDDLE) WILDS JAMES S			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE MO DA YR 01 23 76		5. CATEGORY OF EMPLOYMENT	
6. FUNDS A		7. FPM AND NSCA 6230 0118 0002		8. CSC OR OTHER LEGAL AUTHORITY	
9. ORGANIZATIONAL DESIGNATIONS DDO/CCS		10. LOCATION OF OFFICIAL STATION WASH., D.C.			
11. POSITION TITLE RECORDS ADMIN OF CH		12. POSITION NUMBER 6144		13. CAREER SERVICE DESIGNATION DAC	
14. CLASSIFICATION SCHEDULE (GS, LB, etc) GS		15. OCCUPATIONAL SERIES 0344.01		17. SALARY OR RATE 12	
16. REMARKS					
SIGNATURE OR OTHER AUTHENTICATION 30 WCS					

SERIAL NO.		NAME		ORGANIZATION		STATUS		EMP. PRIMS	
010032		WOODS JAMES S		39 115		V			
OLD SALARY RATE				NEW SALARY RATE				EFFECTIVE DATE	
Grade	Step	Salary	Last EM. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ
GS 12	3	20,678	11/24/74	GS 12	4	21,324	11/23/75		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE									
SIGNATURE <i>Cell Cell</i>							DATE 12 Sept 1975		
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERKS INITIALS <i>[Handwritten initials]</i>									
FORM 560E Use previous editions PAY CHANGE NOTIFICATION (4-51)									

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11541 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1976

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
WOODS JAMES S	010032	39 115	V	GS 12 4	\$22,485

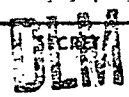
"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11883 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 12 OCTOBER 1975

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
WOODS JAMES S	010032	39 115	V	GS 12 3	\$20,678

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																	
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)															
010032		WOODS JAMES S															
3 NATURE OF PERSONNEL ACTION					4 EFFECTIVE DATE			5 CATEGORY OF EMPLOYMENT									
PROMOTION					11 24 74			REGULAR									
FUNDS		V TO V		V TO CF		7. FAN AND NSCA			8 CSC OR OTHER LEGAL AUTHORITY								
X						5230 0121 0002			50 USC 403								
9 ORGANIZATIONAL DESIGNATIONS					10 LOCATION OF OFFICIAL STATION												
DCC/CCS REGISTRY					WASH., D.C.												
11. POSITION TITLE					12. POSITION NUMBER			13. SERVICE DESIGNATION									
REGIS. ADMIN. GE. CH.					0081			DAC									
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE										
GS			0344.01		12 3		1983										
18 REMARKS																	
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 Mgr's Code		25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LES					
22	10	NUMERIC	ALPHABETIC	75043		1	MO	DA	YE	MO	DA	YE	MO	DA	YE		
		28 NTE EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 Correction / Cancellation Data		33 SECURITY REG NO		34 SEN						
		MO	DA	YE	1	CSC	CUP	TCA	NONE	EOD DATA							
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 REGU / HEALTH INSURANCE		40 SOCIAL SECURITY NO.							
CODE		MO		DA		MO		DA		YE		CSC		REGU		HEALTH INS CODE	
1						CSC		REGU		HEALTH INS CODE							
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT CODE		43 FEDERAL TAX DATA		44 STATE TAX DATA									
CODE				FORM EXECUTED		CODE		NOT TAX EXEMPTION		FORM EXECUTED		CODE		NO. 348		STATE CODE	
1 NO PREVIOUS SERVICE				1 YES		1 YES		1 YES		1 YES		1 YES		1 YES		1 YES	
2 BREAK IN SERVICE (LESS THAN 3 YRS)				2 NO		2 NO		2 NO		2 NO		2 NO		2 NO		2 NO	
3 BREAK IN SERVICE (MORE THAN 3 YRS)																	
SIGNATURE OR OTHER AUTHENTICATION												POSTED		DEC 3 1974		[Signature]	



SECRET
(When Filled In)

BBG: 19 SEPT 73

NOTIFICATION OF PERSONNEL ACTION												
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)										
010032		WOODS JAMES S										
3 NATURE OF PERSONNEL ACTION						4 EFFECTIVE DATE			5 CATEGORY OF EMPLOYMENT			
REASSIGNMENT, TRANSFER TO VOUCHERED FUNDS AND DELEGATION OF NSCA						09 16 73			REGULAR			
6 FUNDS		7 FAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY		9 ORGANIZATIONAL DESIGNATIONS		10 LOCATION OF OFFICIAL STATION				
X		4230 0121 0002		50 USC 403 J		DDO/CCS OFFICE OF THE CHIEF RECORDS MANAGEMENT AND REGISTRY SEC		WASH., D.C.				
11 POSITION TITLE						12 POSITION NUMBER		13 SERVICE DESIGNATION				
RECORDS ADMIN OF CH						0061		D				
14 CLASSIFICATION SCHEDULE (GS, LE, SES)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE					
GS			0344.01		11 6		16326					
18 REMARKS												
W-2 INFO: CIA												
HOME BASE: SS												
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19 ACTION CODE	20 EMPLOY CODE	21 SERVICE CODING		22 STATION CODE	23 INTEGRITY CODE	24 RESERVE CODE	25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LET	
16	10	35100 CCS		75013		1	02 29 28					
28 INT EXPIRES			29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 Correction / Cancellation Date		33 SECURITY RFO NO	34 SEX
XX XX XX											EOD DATA	
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 FEGLI / HEALTH INSURANCE		40 SOCIAL SECURITY NO		
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEA / CAT CODE		43 FEDERAL TAX DATA		44 STATE TAX DATA				
45 SIGNATURE OR OTHER AUTHENTICATION						46 POSTED						
FROM: EUR						9-30-73						

SECRET

DB

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11811 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 OCTOBER 1974

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
WOODS JAMES S	010032	39	115	V GS 11 6	\$19,061

FOR PURPOSES OF THE FAIR LABOR STANDARDS ACT, AS AMENDED,
YOU ARE DESIGNATED EXEMPT.

EFFECTIVE DATE OF DESIGNATION: 01 MAY 1974.

WOODS JAMES S

010032

42300121

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11739 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 OCTOBER 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
WOODS JAMES S.	010032	39	115	V GS 11 6	\$17,116

"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER 11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
WOODS JAMES S.	010032	44	750	CF GS 10 7	\$15,331

EFFECTIVE DATE OF PAY ADJUSTMENT CORRECTED FROM 7 JAN 1973 TO 1 OCT 1972 UNDER EXECUTIVE ORDER 11777, DATED 12 APR 1974.

SECRET
(When Filled In)

LML: 13 FEB 73

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		3 NAME (LAST FIRST MIDDLE)									
010032		WOODS JAMES S									
3 NATURE OF PERSONNEL ACTION						4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT			
PROMOTION						MO DA YR 02 04 73		REGULAR			
A FUNDS		V TO V		V TO OF		7 Financial Authority No Chargeable		8 CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO OF		3135 1267 0000		50 USC 403 J			
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION					
DDP/EUROPEAN DIVISION FOREIGN FIELD ITALIAN AREA ROME STATION SUPPORT BRANCH						ROME, ITALY					
11 POSITION TITLE						12 POSITION NUMBER		13 SERVICE DESIGNATION			
RECORDS ADM OF						0699		D			
14 CLASSIFICATION SCHEDULE (GS, LS, etc.)			15 OCCUPATIONAL SERIES			16 GRADE AND STEP		17 SALARY OR RATE			
GS			0344.01			11 6		16326			
18 REMARKS											
HOME BASE: IS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATION CODE	23 INTERNAL CODE	24 GRADE CODE	25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LET
22	10	44750	EUR	36533		3	MO DA YR 02 20 29		MO DA YR 02 04 73		MO DA YR 02 04 73
29. NTE EXPIRES			29. SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 Continuation/Continuation Data		33 SECURITY REQ MO		34. SEX
MO DA YR 02 03 74			81				EOD DATA				
35. VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 DUAIRN CATEGORY		39 REGALY REA. IN INSURANCE		40 SOCIAL SECURITY NO	
CODE 0 NONE 1 5 PT 2 10 PT		MO DA YR MO DA YR		MO DA YR MO DA YR		1 1-1 2 2-1 3 3-1		0 WAIVER 1 YES		HEALTH INS. CODE	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT. CODE		43 FEDERAL TAX DATA		44 STATE TAX DATA			
CODE 0 ANY PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)						FORM EXECUTED CODE 1 YES 2 NO		FORM EXECUTED 1 YES 2 NO			
SIGNATURE OF OTHER AUTHENTICATION											
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FORM 94a 11-69 Use Previous Edn.

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FORM 94a 11-69
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"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND EXECUTIVE ORDER 11637 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

NAME	SERIAL	ORGN.	FUNDS	GR.	STEP	NEW SALARY
WOODS JAMES S	010032	44	750	CP	GS 10 7	\$14,981

23 MAY 1971.

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF

1 SERIAL NUMBER 010032	2 NAME (LAST FIRST MIDDLE) WOODS JAMES S
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3 NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS	4 EFFECTIVE DATE MO DA YR 05 30 71	5 CATEGORY OF EMPLOYMENT REGULAR
------------------------------------------------------------------------------------	------------------------------------------	-------------------------------------

6 FUNDS	V TO V X C TO V	V TO CF X C TO CF	7 Financial Analysis No. Chargeable 1136 1267 0000	8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
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9 ORGANIZATION DBP/EUR DIVISION FOREIGN FIELD ITALIAN AREA ROME STATION SUPPORT BRANCH	10 LOCATION OF OFFICIAL STATION ROME, ITALY
-------------------------------------------------------------------------------------------------------	------------------------------------------------

11 POSITION TITLE RECORDS ADM OF	12 POSITION NUMBER 0699	13 SERVICE DESIGNATION D
-------------------------------------	----------------------------	-----------------------------

14 CLASSIFICATION SYMBOL (GS, IS, RS)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE
GS	0344.01	10 7	13821

18 REMARKS

HOME BASE: EUR

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 20	20 EMPLOYEE CODE 10	21 OFFICE SYMBOL 44525	22 STATION CODE EUR	23 STATION CODE 36533	24 INITIAL CODE 3	25 DATE OF BIRTH MO DA YR 02 20 28	26 DATE OF GRADE MO DA YR	27 DATE OF LEI MO DA YR
28 NET SALARY MO DA YR 05 29 73	29 SPECIAL PAYMENTS MO DA YR 82	30 RESUME DATA CODE	31 SENIORITY DATA CODE CODE	32 Correction/Correlation Data MO DA YR	33 SECURITY (117 740) MO DA YR	34 SER MO DA YR	35 ADD DATA	
33 VLT PREFERENCE CODE	34 SER (117 740) MO DA YR	35 WORKING COMP DATE MO DA YR	36 CAREER CATEGORY CODE	37 REGU HEALTH INSURANCE CODE	38 SOCIAL SECURITY NO			
39 FEDERAL TAX DATA CODE	40 STATE TAX DATA CODE	41 LEAVE CAT CODE	42 FEDERAL TAX DATA CODE	43 STATE TAX DATA CODE	44			

SIGNATURE OR OTHER AUTHENTICATION

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15



ARS: 11 MARCH 71

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
010032		WOODS JAMES S									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
CHANGE OF FAN				02 18 71		REGULAR					
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY			
X						1236 1166 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION						
DDP/EUR DEVELOPMENT COMPLEMENT					WASH., D.C.						
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATIONS					
RECORDS ADM OFFICER				9957		D					
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS			0344.01		10 7		13621				
18. REMARKS											
OTHER											
HOME BASE: EUR											
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. MIDPAY CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI	
37	16	NUMERIC	ALPHABETIC	75013		1	MO	DA	MO	DA	
		44997	EUR				02	20	78		
28. DATE STARTS		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/COMPLETION DATA		33. SECURITY REG NO	34. SER
				1. CIC 2. CIA 3. OIA 4. OPA 5. RESERVE						FOD DATA	
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG LEAVE DATE		38. CAREER CATEGORY		39. REGCY HEALTH INSURANCE		40. SOCIAL SECURITY NO	
						CAF OSA PROF EMP		CODE CODE 1 YES 2 NO		HEALTH INS CODE	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA	
1. NO PREVIOUS SERVIC 2. NO STRIKE IN SERVICE 3. SERVIC IN WHICH LESS THAN 1 YRS 4. PERIOD OF SERVICE LONGER THAN 1 YRS						1. YES 2. NO				1. YES 2. NO 3. NO	
SIGNATURE OF OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 312-7142 </div>											

PERMANENT 11-70
5-00 4-00 6-70

Use Previous Edition

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SECRET
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

OPTIONAL FORM NO. 346 (REV. 6-70)

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND EXECUTIVE ORDER 11576 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
WOODS JAMES 3	010032	44	997	V GS. 10 7	\$13,821

ARS: 27 JAN 71

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION														
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)												
010032		WOODS JAMES S												
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT								
REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS-CORRECTION				01 10 71		REGULAR								
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY						
X		CF TO V		CF TO CF		1234 1186 0000		50 USC 403 J						
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION										
DDP/EUR. DEVELOPMENT COMPLEMENT				WASH., D.C.										
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION								
RECORDS ADM OFFICER				9997		D								
14. CLASSIFICATION-SCHEDULE (GS, LR, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE								
GS		0344.01		10 7		13821								
18. REMARKS														
THIS ACTION CORRECTS FORM 1150 THE EFFECTIVE DATE WHICH READ 12/13/70 TO READ 01/10/71.														
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL														
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. UTILITY CODE	24. HOURS CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI				
58	18	NUMERIC	ALPHABETIC	75013		1	MO	DA	YR	MO	DA	YR		
28. INT. EXP. RES.	29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. Correction/Cancellation Done		33. SECURITY REQ. PND		34. SEA					
NO	DA	YR	1	2	3	4	5	6	7	8	9	10		
NO	DA	YR	CSC	CF	FSA	NONE	16	12	13	70	E.O.D. DATA			
35. VET. PREFERENCE	36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FEGLI - HEALTH INSURANCE				40. SOCIAL SECURITY NO.			
CODE	1	2	3	4	5	6	7	8	9	10	11	12		
NO	DA	YR	NO	DA	YR	CSC	HEW	CODE	CODE	NO. WA. VSR	HEALTH INS. CODE	1	2	
31. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT. CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA									
CODE	1	2	3	4	5	6	7	8	9	10	11	12	13	
NO	PREVIOUS SERVICE	NO	BREAK IN SERVICE	NO	BREAK IN SERVICE (LESS THAN 2 YRS.)	NO	BREAK IN SERVICE (MORE THAN 2 YRS.)	NEW EXECUTED	CODE	NO. TAX EXEMPTIONS	NO. EXECUTED	CODE	NO. TAX EXEMPTIONS	STATE CODE
NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
SIGNATURE OR OTHER AUTHENTICATION										POSTED		1-29-71		

SECRET
(When Filled In)

ARR: 11 DEC 70

NOTIFICATION OF PERSONNEL ACTION															
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)													
010032		WOODS JAMES S													
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT									
REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS				NO DA YR 12 13 70		REGULAR									
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY							
X		CF TO V		CF TO CF		1236 1186 0000		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION									
DDP/EUR DEVELOPMENT COMPLEMENT						WASH., D.C.									
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION									
RECORDS ADM OFF				9997		D									
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE						
GS			0344.01			10 7			13041						
18. REMARKS OTHER															
HOME BASE: EUR															
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE NO		22. STATION CODE		23. INTEGRAL CODE		24. HIRING CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
16	18	44597 EUR		75013		1		1		12 20 20					
28. TIME EMPLOY		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/REVISION DATA		33. SECURITY INFO NO		34. SER			
										EOD DATA					
35. NET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEEDBACK HEALTH INSURANCE		40. SOCIAL SECURITY NO					
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA					
45. SIGNATURE OR OTHER AUTHENTICATION															

POSTED
11 12-17-70

1 SERIAL NO		2 NAME		3 ORGANIZATION		4 FUNDS		5 LWOP HOURS	
010032		WOODS JAMES S.		44 525		CF			
6 OLD SALARY RATE				7 NEW SALARY RATE				8 TYPE ACTION	
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ
GS	10 6	\$12,679	07/28/68	GS	10 7	\$13,041	07/26/70		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
<i>[Signature]</i>						6/23/70			
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CER'S INITIALS						ADJUD BY			
FORM 7-66 560 E Use previous editions						PAY CHANGE NOTIFICATION <i>[Signature]</i> (4-81)			

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11924 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 28 DECEMBER 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
WOODS JAMES S	010032	44	525	CF GS 10 6	\$12,679

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 213 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
WOODS JAMES S	010032	44	525	CF GS 10 7	\$13,042

4 NOV 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER 010032		2. NAME (LAST FIRST MIDDLE) WOODS JAMES S	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE 11 04 68
			5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS	V TO V	V TO CF	7. Financial Analysis No. Chargeable
	CF TO V	X	CF TO CF
			8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
9. ORGANIZATIONAL DESIGNATIONS DDP/EUR FOREIGN FIELD BRITISH COMMONWEALTH REGION LONDON STATION SUPPORT BRANCH REGISTRY SECTION		10. LOCATION OF OFFICIAL STATION LONDON, ENGLAND	
11. POSITION TITLE RECORDS ADM OF		12. POSITION NUMBER 0254	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (OS, IS, etc.) GS	15. OCCUPATIONAL SERIES 0344.01	16. GRADE AND STEP 10 6	17. SALARY OR RATE 10847
18. REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMBER: 44525 ALPHABET: EUR		22. STATION CODE 21025	23. INTEGRATE CODE	24. EMPLOY CODE 3	25. DATE OF BIRTH 02 20 28	26. DATE OF GRADE	27. DATE OF LEI
28. RATE EXPIRES 11 03 70	29. SPECIAL REFERENCE 83	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION / CANCELLATION DATA	EOD DATA		33. SECURITY REF. NO.	34. SEX	
35. VET PREFERENCE	36. SERV. COMP. DATE	37. LONG. COMP. DATE	38. CAREER CATEGORY	39. FEGLI / HEALTH INSURANCE	40. SOCIAL SECURITY NO.				
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE			42. LEAVE CAT. CODE	43. FEDERAL TAX DATA		44. STATE TAX DATA			
45. SIGNATURE OR OTHER AUTHENTICATION FROM FE			46. SIGNATURE OR OTHER AUTHENTICATION 11-7-68 Dm						

VD: 6 AUG 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF

1 SERIAL NUMBER 010032		2 NAME (LAST FIRST MIDDLE) WOODS JAMES S	
3 NATURE OF PERSONNEL ACTION PROMOTION			4 EFFECTIVE DATE 07 28 68
			5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS	V TO V CF TO V	V TO CF CF TO CF	7 Practical Analysis No. Chargeable 9137 1487 0000
			8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
9 ORGANIZATIONAL DESIGNATIONS DUP/FE FOREIGN FIELD FE/VNO VIET NAM STATION INTELLIGENCE DIVISION COLLATION BRANCH CURRENT INTELLIGENCE SECTION GEOGRAPHIC UNIT		10 LOCATION OF OFFICIAL STATION SAIGON, SOUTH VIET. NAM	
11 POSITION TITLE RECORDS ADMIN OF		12 POSITION NUMBER 4984	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (OS, LB, etc.) GS	15 OCCUPATIONAL SERIES 0344.01	16 GRADE AND STEP 10 6	17 SALARY OR RATE 10847
18 REMARKS RECORDS ADMIN OFFICER OCCUPYING 10 GENERAL POSITION			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 22	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC: 45500 ALPHABETIC: FE		22 STATION CODE 77205	23 INTEROFF CODE 3	24 HIRING CODE 02 20 68	25 DATE OF BIRTH 07 28 68	26 DATE OF GRADE 07 28 68	27 DATE OF LES 07 28 68
28 NOTE EXEMPT		29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 Correction/Contribution Data		33 SECURITY RFO NO		34 SEA
35 VET PREFERENCE		36 SERV. COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY		39 REGIST / HEALTH INSURANCE		40 SOCIAL SECURITY NO.	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE		42 LEAVE CAT. CODE	43 FEDERAL TAX DATA			44 STATE TAX DATA			

SIGNATURE OR OTHER AUTHENTICATION

POSTED
[Signature]
1651

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-206 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 6 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
WOODS JAMES S	010032	45	500	CF GS 09 7	\$ 9,668	\$10,154

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
WOODS JAMES S	010032	45	500	CF GS 09 7	\$ 9,202	\$ 9,668

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION						
1 SERIAL NUMBER		2 NAME (LAST-FIRST MIDDLE)				
010032		WOODS JAMES S				
3 NATURE OF PERSONNEL ACTION			4 EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
REASSIGNMENT			MO. DA YE 05 21 67			
6 FUNDS		V TO V	V TO G	7. FINANCIAL ANALYSIS NO. CHARGEABLE		8 CSC OR OTHER LEGAL AUTHORITY
G TO V		X	G TO G	7137 1487 0000		
9 ORGANIZATIONAL DESIGNATIONS			10 LOCATION OF OFFICIAL STATION			
DDP&F DIVISION			SAIGON, SOUTH VIET NAM			
11 POSITION TITLE			12 POSITION NUMBER	13 CAREER SERVICE DESIGNATION		
RECORDS ADMIN OF			4965	D		
14. CLASSIFICATION SCHEDULE (GS, LB, etc)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE		
GS		0344,01	09			
18. REMARKS						
SIGNATURE OR OTHER AUTHENTICATION						

MRT: 9 DEC 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 010032		2. NAME (LAST-FIRST-MIDDLE) WOODS JAMES S	
3. NATURE OF PERSONNEL ACTION DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM			
4. EFFECTIVE DATE MO: DA: YR 12 18 66		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V CF TO V X		7. COST CENTER NO. CHARGEABLE 7137 1566 0000	
		8. CSC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203	
9. ORGANIZATIONAL DESIGNATIONS DDP/FE		10. LOCATION OF OFFICIAL STATION Saigon, South Viet Nam Tokyo, JAPAN	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP 09
		17. SALARY OR RATE	
18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.			
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. INTEGREE CODE	24. MONTHS CODE	25. DATE OF BIRTH MO DA YR
26. DATE OF GRADE	27. DATE OF LEI MO DA YR	28. NTE EXPIRES MO DA YR	29. SPECIAL REFERENCE
30. RETIREMENT DATA 1 - CSC 2 - FICA 3 - NONE 2		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR
33. SECURITY REQ NO	34. SEX	EOD DATA →	
35. VET. PREFERENCE CODE 0 - NONE 1 - 5 PT 2 - 10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP. DATE MO DA YR	38. CAREER CATEGORY CAR % PROV %
39. FEGLI / HEALTH INSURANCE CODE 0 - WAIVER 1 - YES	40. HEALTH INS CODE	41. SOCIAL SECURITY NO.	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 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)		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1 - YES 2 - NO
		44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1 - YES 2 - NO	45. STATE CODE
SIGNATURE OR OTHER AUTHENTICATION			

POSTED
12-14-66

MRT: 8 DEC 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
OCF										
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)								
010032		WOODS JAMES S								
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
REASSIGNMENT				12 08 66		REGULAR				
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY		
CF TO V		X		CF TO CF		7137 1487 0000		50 USC 403 J		
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION						
DDP/FE FOREIGN FIELD FE/VNC - VIETNAM STATION EXECUTIVE OFFICE REGISTRY SECTION				SAIGON, SOUTH VIET NAM						
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION				
RECORDS ADMIN OF				4127		D				
14. CLASSIFICATION SCHEDULE (GS, LR, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS			0344.01		09 7		9262			
18. REMARKS										
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. IDENTIFICATION CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI
37	10	45500	FE	77205	3	02 20 28				
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO.	34. SEX	
								EOD DATA		
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FEHI/HEALTH INSURANCE		40. SOCIAL SECURITY NO.
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT.		43. FEDERAL TAX DATA		44. STATE TAX DATA		
SIGNATURE OR OTHER AUTHENTICATION										

POSTED
12-12-66

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME SERIAL ORGN, FUNDS GR-STEP OLD SALARY NEW SALARY
 WOODS JAMES S G10032 45 380 CF GS 09 7 \$ 9,003 \$ 9,262

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
G10032		WOODS JAMES S		45 380 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	ADI
GS-09	6	88719	11/07/65	GS-09	7	89003	03/27/66			
8. Remarks and Authentication										
QUALITY STEP INCREASE										
/s/ Emmett D. Roberts Date: 31 March 1966										
PAY CHANGE NOTIFICATION										

Form 560

Obtain from
 Edition

(4-51)

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
G10032		WOODS JAMES S		45 380 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	ADI
GS-09	6	88719	11/07/65	GS-09	7	89003	03/27/66			
8. Remarks and Authentication										
QUALITY STEP INCREASE										
/s/ Emmett D. Roberts Date: 31 March 1966										

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 2 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
WOODS JAMES S	010032	45 380	CF	GS 09 3	\$ 8,200	\$ 8,495

500

10

10F

1. Serial No.		2. Name		3. Cont. Control Number		4. LWOP Hours				
010032		WOODS JAMES S		45 380 CF						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PM	LSH	ADJ.
GS 09 3		8195	11/10/63	GS 09 3		8749	11/07/65			
8. Remarks and Authentication										
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS _____ AUDITED BY <u>SAH</u>										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE: <u>[Signature]</u> DATE: <u>11 October 65</u>										
PAY CHANGE NOTIFICATION										

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

ADPD 09/18/64

1 SERIAL NUMBER 010032	2 NAME (LAST FIRST MIDDLE) WOODS JAMES S
---------------------------	---------------------------------------------

3 NATURE OF PERSONNEL ACTION REASSIGNMENT	4 EFFECTIVE DATE MO DA YR 09 18 64	5 CATEGORY OF EMPLOYMENT
----------------------------------------------	------------------------------------------	--------------------------

6 FUNDS V TO V O TO V X O 30 O	7 COST CENTER NO. CHARGEABLE 5137 1966 0000	8 CSC OR OTHER LEGAL AUTHORITY
-----------------------------------------	------------------------------------------------	--------------------------------

9 ORGANIZATION (if assignment) DDP/FE DIVISION JKO TOKYO CEN REG REC	10 LOCATION OF OFFICIAL STATION TOKYO JAPAN
----------------------------------------------------------------------------	------------------------------------------------

11 POSITION TITLE INTEL ANALYST CM	12 POSITION NUMBER 4466	13 CAREER SERVICE DESIGNATION D
---------------------------------------	----------------------------	------------------------------------

14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15 OCCUPATIONAL SERIES 0132.39	16 GRADE AND STEP 09	17 SALARY OR RATE
-------------------------------------------------	-----------------------------------	-------------------------	-------------------

18 REMARKS

SIGNATURE OF OTHER AUTHENTICATION

POSTED

9/24/64 MOR

Form 1120
1-63 MAR 63

Use Previous
Edition

SECRET

16-51
Excludes from automatic
downgrading and
declassification

(When Filled In)

AES: 16 MARCH 61

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER 010032		2. NAME (LAST FIRST-MIDDLE) WOODS JAMES S	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT & TRANSFER TO CONFIDENTIAL FUNDS*		4. EFFECTIVE DATE MO DA YR 03 19 61	
5. CATEGORY OF EMPLOYMENT REGULAR		6. FUNDS V TO V <input checked="" type="checkbox"/> X V TO CF CF TO V CF TO CF	
7. COST CENTER NO. CHARGEABLE 1137 7351 1000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 d	
9. ORGANIZATIONAL DESIGNATIONS DDP FE FE/JAO TOKYO STATION OFFICE OF THE CHIEF CENTRAL REGISTRY AND RECORDS SEC		10. LOCATION OF OFFICIAL STATION TOKYO JAPAN	
11. POSITION TITLE INTEL ANALYST GEN		12. POSITION NUMBER 3061	13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, WS, etc.) GS	15. OCCUPATIONAL SERIES 0132.36	16. GRADE AND STEP 09 3	17. SALARY OR RATE 6765
18. REMARKS *SUBJECT TO APPROVED MEDICAL CLEARANCE PRIOR TO BEING SENT OVERSEAS.			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 20	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 56380 FE	22. STATION CODE 37587	23. INTERSEE CODE	24. RATING CODE 3	25. DATE OF BIRTH MO DA YR 02 20 28	26. DATE OF GRADE MO DA YR	27. DATE OF LEA MO DA YR
28. NTE EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1 - CSC 2 - FICA 3 - NONE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	EOD DATA		33. SECURITY DATA SEC NO	34. SEC 23
35. VET PREFERENCE CODE 0 - NONE 1 - 5 YR 2 - 10 YR	36. SERV. COMP. DATE MO DA YR	37. LONG COMP. DATE MO DA YR	38. MIL. SERV. CREDIT/LED 1 - YES 2 - NO	39. FEGLI/HEALTH INSURANCE CODE 0 - WAIVER 1 - YES	40. SOCIAL SECURITY NO.			
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 12 MOS) 3 - BREAK IN SERVICE (MORE THAN 12 MOS)	42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM 1-BR/1-CD CODE 1 - YES 2 - NO	44. STATE TAX DATA NO TAX EXEMPTIONS FORM 1-BR/1-CD CODE 1 - YES 2 - NO					

SIGNATURE OR OTHER AUTHENTICATION

POSTED
03/22/61 [Signature]

3-12-61

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI MEMORANDUM DATED 1 AUGUST 1962 SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN	FUNDS	OR-ST	OLD SALARY	NEW SALARY
WOODS JAMES S	010032	49	380	CF 05 09 5	\$ 7,975	\$ 7,950

1. Serial No		2. Name		3. Org Center Number		4. LWOP Hours				
010032		WOODS JAMES S		56 380 CF //						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	Effective Date	PM	LSI	ADJ.
GS 09	4	\$ 7,390	11/12/61	GS 09	5	\$ 7,975	11/10/62			
8. Remarks and Authorizations								9		
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD. / / LWOP STATUS AT END OF WAITING PERIOD. CLERKS INITIALS AUDITED BY								742		
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.								26 1/7		
SIGNATURE:								DATE: 11/14-63		
SIGNATURE:								DATE: 11/14-63		
PAY CHANGE NOTIFICATION										

Form 9-61 560 Obsolete Formwork Edition (4-51)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-790 AND DCI MEMORANDUM DATED 1 AUGUST 1964, SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 13 OCTOBER 1964

NAME	SERIAL	ORGN	FUNDS	OR-ST	OLD SALARY	NEW SALARY
WOODS JAMES S	010032	49380	CF 09 4		\$ 6950	\$ 7380

11-5555 WOODS JAMES S

6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			DD	MM	YY				DD	MM	YY
GS 09	2	\$ 6,600	11	15	59	GS 09	3	\$ 6,745	11	13	60

TO BE COMPLETED BY THE OFFICE OF COMPTROLLER

8. CHECK ONE NO EXCESS LWOP EXCESS LWOP
 IF EXCESS LWOP, CHECK FOLLOWING:
 IN PAY STATUS AT END OF WAITING PERIOD
 IN LWOP STATUS AT END OF WAITING PERIOD

9. NUMBER OF HOURS LWOP

10. INITIALS OF CLERK

11. AUDITED BY

TO BE COMPLETED BY THE OFFICE OF PERSONNEL

12. TYPE OF ACTION
 P.O.I. L.S.I. PAY ADJUSTMENT

13. REMARKS

14. AUTHENTICATION

E. J. WOODS

WK

PAY CHANGE NOTIFICATION

FORM 560 OBSOLETE PREVIOUS EDITION REPLACES FORM 5600, AND 5600b. SECRET OFFICIAL PERSONNEL FOLDER (41)

SECRET
(When Filled In)

1. Serial No.	2. Name	3. Cost Center Number	4. LWOP Hours
10032	WOODS JAMES S	DDP/FF 11 UV	

5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS	09	\$ 6,765	11/13/60	GS	4	\$ 6,930	11/12/61			

8. Remarks and Authentication

/ / NO EXCESS LWOP
 / / IN PAY STATUS AT END OF WAITING PERIOD
 / / IN LWOP STATUS AT END OF WAITING PERIOD

E. J. WOODS

WK

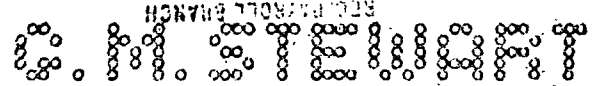
PAY CHANGE NOTIFICATION

SECRET (4-31)

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SO	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
01	WOODS JAMES S	110032	51 12	GS-09 2	\$ 6,135	\$ 6,600

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO. 110032		2. NAME WOODS JAMES S			3. ASSIGNED ORGAN. DDP/FE /		4. FUNDS V-20	5. ALLOTMENT 137			
6. OLD SALARY RATE					7. NEW SALARY RATE						
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA.	YE.				MO	DA.	YE.
GS	9	\$ 5,984	11	16	58	GS	9	\$ 6,135	11	15	59
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER											
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP. <input type="checkbox"/> EXCESS LWOP IF EXCESS LWOP, CHECK FOLLOWING: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD					9. NUMBER OF HOURS LWOP 10. INITIALS OF CLERK 11. AUDITED BY						
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. TYPE OF ACTION <input type="checkbox"/> P.S.I. <input type="checkbox"/> E.S.I. <input type="checkbox"/> PAY ADJUSTMENT					13. REMARKS <div style="text-align: right; font-size: 2em; font-family: cursive;">AK</div>						
14. AUTHENTICATION <div style="text-align: center;"> <p>55. WASHINGTON FIELD</p> <p>MEMPHIS BRANCH</p>  <p>SECRET</p> </div>											
PAY CHANGE NOTIFICATION											

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION															
NCH 20 MAR 59															
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vet. Prof.		5. Sex		6. CS - EOD		
10032		WOODS JAMES S				Mo.	Da.	Yr.	None-0	Code	M	1	Mo.	Da.	Yr.
						02	20	28	5 Pt-1 10 Pt-2	1		04	21	52	
7. SCD		8. CSC Rptmt.		9. CSC Or Other Legal Authority			10. Apmt. Affidav.			11. FEGLI		12. LCD		13. <small>ans. serv. ltr.</small>	
Mo.	Da.	Yr.	Yes-1	Code				Mo.	Da.	Yr.	Yes-1	Code			
11	12	48	No-2	1	50 USCA 403								04	21	52
									1						2

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code	15. Location Of Official Station				Station Code	
DDP FE FE/PSH PHILIPPINES STATION SUPPORT BRANCH				5161	MANILA, R.P.				57557	
16. Dept. - Field		17. Position Title			18. Position No.		19. Serv.	20. Occup. Series		
Dept - 2	Code									
USPd - 4	5	RECDS MGMT ANAL			3382		GS	0306.01		
Frgh - 6										
21. Grade & Step		22. Salary Or Rate		23. SD	24. Date Of Grade		25. PSI Due		26. Appropriation Number	
09 1		\$ 5985		DI	Mo.	Da.	Yr.	Mo.	Da.	Yr.
					11	16	59	11	15	59
					9 3780 55 006					

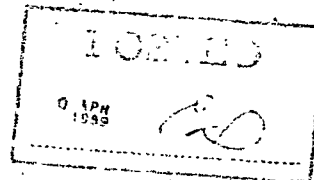
ACTION

27. Nature Of Action		Code	28. Eff. Date		29. Type Of Employee		Code	30. Separation Data	
REASSIGNMENT TRANSFER TO VOUCHERED FUNDS		01	Mo.	Da.	Yr.	REGULAR		01	
			03	22	59				

PRESENT ASSIGNMENT

31. Organizational Designations				Code	32. Location Of Official Station				Station Code	
DDP FE OFFICE OF THE CHIEF SECRETARIAT				5112	WASH., D. C.				75013	
33. Dept. - Field		34. Position Title			35. Position No.		36. Serv.	37. Occup. Series		
Dept - 2	Code									
USPd - 4	2	RECDS MGMT OFF			2461		GS	0306.01		
Frgh - 6										
38. Grade & Step		39. Salary Or Rate		40. SD	41. Date Of Grade		42. PSI Due		43. Appropriation Number	
09 1		\$ 5985		DI	Mo.	Da.	Yr.	Mo.	Da.	Yr.
					11	16	59	11	15	59
					9 3700 20 001					

44. Remarks



SECRET
(When Filled In)

MCM : 4 NOV 58												NOTIFICATION OF PERSONNEL ACTION					
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vet Pref.		5. Sex		6. CS - EOD				
510032		WOODS JAMES S				Mo. 02 Da. 20 Yr. 28			Non-0 5 Pt-1 10 Pt-9 Code 1		M 1		Mo. 04 Da. 21 Yr. 52				
7. SCD		8. CSC Retmt.		9. CSC Or Other Legal Authority		10. Apmt. Affidav.			11. FEGLI		12. LCD		13. mil. Serv. Credit, Yrs.				
Mo. 11 Da. 12 Yr. 48		Yes-1 No-2		Code 1 50 USCA 403 J		Mo. - Da. - Yr. -			Yes-1 No-2		Mo. 04 Da. 21 Yr. 52		Yes-1 No-2				

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP FE BRANCH 3 PHILIPPINES STATION ADMIN SEC				5161		MANILA, R.P.				57557	
16. Dept. Field		17. Position Title				18. Position No.		19. Serv.		20. Occup. Series	
Dept - 1 USfld - 3 Frqn - 5		RECORDS MGMT ANALYST				3382		GS		0306.01	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
07 4		\$ 5430		DI		Mo. 04 Da. 10 Yr. 55		Mo. 04 Da. 06 Yr. 58		8 3780 55 006	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
PROMOTION		30		Mo. 11 Da. 16 Yr. 58		REGULAR		01			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP FE FE/PSH PHILIPPINES STATION SUPPORT BRANCH				5161		MANILA, R.P.				57557	
33. Dept. Field		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series	
Dept - 1 USfld - 3 Frqn - 5		RECDS MGMT ANAL				3382		GS		0306.01	
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
09 1		\$ 5985		DI		Mo. 11 Da. 16 Yr. 58		Mo. 11 Da. 15 Yr. 59		9 3780 55 006	

44. Remarks

POSTED

20 NOV 1958 *ZB*

SECRET

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE
12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
WOODS JAMES S	510032	GS-07-4	\$ 4,930	\$ 5,430

GORDON M. STEWART
/S/ DIRECTOR OF PERSONNEL

SECRET

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO. 510032		2. NAME WOODS JAMES S			3. ASSIGNED ORGAB. DDP/FE		4. PURVS UV		5. ALLOTMENT		
6. OLD SALARY RATE					7. NEW SALARY RATE						
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
GS	7	\$ 4,795	04	07	57	GS	7	\$ 4,930	04	06	58
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER											
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LEAVE LWOP, CHECK FOLLOWING:						10. INITIALS OF CLERK					
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD						11. AUTH'D BY					
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD											
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE									13. REMARKS		
GRADE	STEP	SALARY	MO.	DA.	YR.	<p style="text-align: right;">422005 6005 P.S. M. S. STEWART</p>					
14. AUTHENTICATION											
PERIODIC STEP INCREASE - AUTHENTICATION											

SECRET
(When Filled In)

50
64

NOTIFICATION OF PERSONNEL ACTION															
LVL															
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vol. Pref.		5. Sex		6. CS - EOD		
510032		WOODS JAMES S				Mo.	Da.	Yr.	None-0	Code	M	1	Mo.	Da.	Yr.
02		20		28	10 Pt-1	1	1	04	21	52					
7. SED		8. CSC Rptmt.		9. CSC Or Other Legal Authority			10. Anmt. Affidav.		11. FEGLI		12. LCD		13. MIL. SER. No.		
Mo.	Da.	Yr.	Yes-1	Code				Mo.	Da.	Yr.	Yes-1	Code			
XX	XX	XX	No-8	1	50 USCA 403 J										

PREVIOUS ASSIGNMENT											
14. Organizational Designations					Code		15. Location Of Official Station			Station Code	
DDP FI RECORDS INTEGRATION DIV ANALYSIS AND OPERATIONS BR ANALYSIS SEC							WASH., D.C.				
16. Dept. - Field		17. Position Title			18. Position No.		19. Serv.		20. Occup. Series		
Dept. - 1	Code				430.12		GS		0132.35		
USfld - 3	2	INTEL ANALYST									
Frqn - 5											
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. Pst Due		26. Appropriation Number	
07 3		\$ 2795		DI						S 2309 23	

ACTION													
27. Nature Of Action				Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
REASSIGNMENT TRANSFER TO UNVOUCHERED FUNDS				06		09 08 57		REGULAR		.01			

PRESENT ASSIGNMENT											
31. Organizational Designations					Code		32. Location Of Official Station			Station Code	
DDP FE BRANCH 3 PHILIPPINES STATION ADMIN SEC					5161		MANILA, P.P.			57557	
33. Dept. - Field		34. Position Title			35. Position No.		36. Serv.		37. Occup. Series		
Dept. - 1	Code	5 RECORDS MGMT ANALYST			3382		GS		0306.01		
USfld - 3											
Frqn - 5											
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. Pst Due		43. Appropriation Number	
07 3		\$ 2795		DI		04 10 55		04 10 55		8 3782 55 206	

44. Remarks
SUBJECT TO APPROVED MEDICAL CLEARANCE PRIOR TO BEING SENT OVERSEAS.

10612
[Signature]
06/2/57

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME			3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT		
110032		WOODS JAMES S			DDP/FI 29		V-20				
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA	YR				MO	DA	YR
7	2	\$ 4,660	04	08	56	7	3	\$ 4,795	04	07	57
REMARKS											
CERTIFICATION											
I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.											
TYPED, OR PRINTED, NAME OF SUPERVISOR				DATE		SIGNATURE OF SUPERVISOR					
JOHN M. SCOTT				11 MAR 1957		<i>[Signature]</i>					
PERIODIC STEP INCREASE - CERTIFICATION											

FORM NO. 560
1 MAR. 56

SECRET

PERSONNEL FOLDER (4)

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME			3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT		
110032		WOODS JAMES S			DDP/FI		V-20		2301		
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA	YR				MO	DA	YR
7	2	\$ 4,660	04	08	56	7	3	\$ 4,795	04	07	57
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER											
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP IF EXCESS LEAVE LWOP, CHECK FOLLOWING: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD						9. NUMBER OF HOURS LWOP					
						10. INITIALS OF CLERK			11. AUDITED BY		
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	MO	DA	YR						
14. AUTHENTICATION											
PERIODIC STEP INCREASE - AUTHENTICATION											

FORM NO. 560b
1 MAR. 56

SECRET

PERSONNEL FOLDER (4)

MEMORANDUM FOR: CHIEF, FINANCE DIVISION

ATTENTION: Payroll Section

SUBJECT: Change in Assignment Request Designation -
Personal Services of **WOOTE, James B.**

1. The Division request that copy of personal services assignment for JPA employees be changed effective 1/1/68 to the following:

FROM ASSIGNMENT **6-3710-55-096**

TO ASSIGNMENT **6-2309-83**

2. When the change in responsibility is complete, that a copy of this request on Form No. 101 be sent to the appropriate Budget Officer with the request for the change in assignment.

BT

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR - MISS - MRS - ONE GIVEN NAME, INITIALS) AND SURNAME MR. JAMES S. WOODS		2. DATE OF BIRTH 20 Feb 1923	3. JOURNAL OR ACTION NO.	4. DATE 22 August 1956
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) HEADQUARTERS		6. EFFECTIVE DATE 26 Aug 1956	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 USCA 403 J	
FROM EW-430.02		TO		
8. POSITION TITLE Intel Analyst EW-430.12		9. SERVICE, SERIES, GRADE, SALARY GS-012.3-7 \$4660.00 per annum		
10. ORGANIZATIONAL DESIGNATIONS 410023		11. HEADQUARTERS Washington, D. C.		
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> 5-PT. <input type="checkbox"/> 10 POINT		14. POSITION CLASSIFICATION ACTION BD-III		
15. APPROXIMATION FROM: 7-2309-03 TO: Roma 750-13		17. SUBJECT TO C.S. RETIREMENT ACT (YES/NO) Yes	18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS UNIT)	19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
20. REMARKS: 3 ECD 04/21/52				

POSTED
 8/29/56 RAB

ENTRANCE PERFORMANCE RATING:

Director of Personnel

4. PERSONNEL FOLDER COPY

U.S. GOVERNMENT PRINTING OFFICE: 1950-372647

mm 8/28/56

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

171

1. NAME (LAST-FIRST-MIDDLE-ONE GIVEN NAME, INITIAL(S) AND SURNAME) Mr. James S. Woods 110032		2. DATE OF BIRTH 20 Feb 1928	3. JOURNAL OR ACTION NO.	4. DATE 2 Jul 1956																		
This is to notify you of the following action affecting your employment:																						
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) Reassignment		6. EFFECTIVE DATE 15 Jul 1956	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 U.S.C. 403 j																			
FROM		TO																				
10 (CI) 157-583-03 GS-0136.53-7 \$4660.00 per annum DDP/VI Branch 1-Korea Base Records Integration Branch Personality Files Section Yokosuka, Japan <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		8. POSITION TITLE Intel Analyst BV-430.02 9. SERVICE, SERIAL, GRADE, SALARY GS-0132.53-7 \$4660.00 per annum DDP/VI Records Integration Division Analysis & Operations Branch Analysis Section 10. ORGANIZATIONAL DESIGNATIONS 410025 11. HEADQUARTERS 2 12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL																				
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION																				
<table border="1"> <tr> <th>NONE</th> <th>WWII</th> <th>OTHER</th> <th>5-PT</th> <th>10 POINT</th> </tr> <tr> <td></td> <td></td> <td></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		NONE	WWII	OTHER	5-PT	10 POINT				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<table border="1"> <tr> <th>NEW</th> <th>VICE</th> <th>I. A.</th> <th>REAL</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>			NEW	VICE	I. A.	REAL				
NONE	WWII	OTHER	5-PT	10 POINT																		
			<input checked="" type="checkbox"/>	<input type="checkbox"/>																		
NEW	VICE	I. A.	REAL																			
15. 16. APPROPRIATION		17. SUBJECT TO C. 5. RETIREMENT ACT (YES-NO)		18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)																		
15. W 16. FROM: 7-3740-55-055 TO: 7-6309-25		YES		DD/MI																		
19. LEGAL RESIDENCE		20. REMARKS:																				
<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:		<p style="text-align: center;">"Transfer TO Vouchered Funds FROM Unvouchered Funds."</p> <p style="text-align: center;">3 END 04/21/52</p> <p style="text-align: center;">DIRECTOR OF PERSONNEL</p> <p style="text-align: center;">H. SIGNATURE OR OFFICE AUTHORIZATION</p>																				

POSTED
APD 7/19/56

4. PERSONNEL FOLDER COPY

SECRET

10112 465 ✓

STANDARD FORM 52
PREPARED BY THE
U. S. CIVIL SERVICE COMMISSION
MILITARY AND FEDERAL PERSONNEL
MANUAL CHAPTER 11

REQUEST FOR PERSONNEL ACTION

UNFOOTNOTED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs. - One given name, initial(s), and surname) Mr. James S. Woods	2. DATE OF BIRTH 20 Feb 28	3. REQUEST NO.	4. DATE OF REQUEST 5 May 56
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.) Change in Title and Service Number		B. APPROVED: 17 JUN 1956	

FROM— Ops Off (CE) GS-0136.52-7 DDF/FE Korea Mission Records Integration Branch Personality Files Section Atsugi, Japan	BFF 583.05-7 4660	A. POSITION TITLE AND NUMBER	TO— IO-CI GS-0136.53-7 DDF/FE Branch 1 - Korea Base Records Integration Branch Personality Files Section Yokosuka, Japan	BFF 583.05-7 4660
9. SERVICE GRADE AND SALARY		10. ORGANIZATIONAL DESIGNATIONS	11. HEADQUARTERS	
12. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		SD:DI

8. REMARKS (Use reverse if necessary)

T/O Change

9. REQUESTED BY (Name and title) H. F. Gilbert, FE Personnel Officer	10. REQUEST APPROVED BY Signature: Robert A. Schaboly
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) Iris S. Alton Ex 8761	Title: Felcrao - 21 May 56
13. VETERAN PREFERENCE GRADE: <input type="checkbox"/> NEW <input type="checkbox"/> OTHER <input type="checkbox"/> PI <input type="checkbox"/> 10 POINT CLASS: <input type="checkbox"/> USAB <input type="checkbox"/> OTHER	14. POSITION CLASSIFICATION ACTION NEW: <input type="checkbox"/> VICE: <input type="checkbox"/> I: <input type="checkbox"/> A: <input type="checkbox"/> REAL: <input type="checkbox"/>

15. APPROPRIATION FROM: 6-3760-55-090 TO: S&M	17. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) Yes	18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: D.C.
-----------------------------------------------------------------------	-----------------------------------------------------------	------------------------------------------------------	---------------------------------------------------------------------------------------------------------------

20. STANDARD FORM 50 REMARKS

10112 465

USED IN LIEU OF SF50
NOT IN LIEU OF PERSONNEL ACTION

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL OR FOS CONTROL	WJH	2/28/56	
C. CLASSIFICATION			
D. PLACEMENT OR ENPL	WJH	2/28/56	
E.			

APPROVED BY: **Robert A. Schaboly** SECRET by **Arnold C. Little, 21 May 56**

PERIODIC STEP INCREASE CERTIFICATION

CONFIDENTIAL
(When Filled In)

U S GOVERNMENT PRINTING OFFICE 1964 O-280020

1. Agency and organizational designation		2. Payroll period	3. Block No. UV	4. Step No.
5. Employee's name (and social security account number when appropriate) WOODS, JAMES S.		6. Grade and salary GS-7 \$4525.00		

PAYROLL CHANGE DATA

	BASE PAY	OVERTIME		GROSS PAY	RET.	FEDERAL TAX	BOND	F. L. C. A.	STATE TAX	GROUP LIFE INS.			NET PAY
7. Previous period													
8. New period													
9. Payable period													

10. Remarks AED DIVISION		11. Appropriation(s) FE/7	12. Prepared by slv 1/10
			13. Audited by

Periodic step increase Pay adjustment Other step increase

14. Effective date 8 Apr 56	15. Date last equivalent increase 10 Apr 55	16. Old salary rate \$4525.00	17. New salary rate \$4660.00	18. Performance rating in this cycle or below SERVICE AND CONDUCT ARE SATISFACTORY
--------------------------------	------------------------------------------------	----------------------------------	----------------------------------	------------------------------------------------------------------------------------------

19. LWOP data (Fill in appropriate spaces covering LWOP during following periods):

No excess LWOP. Total excess LWOP

(Check applicable box in case of excess LWOP)

LWOP period(s) of working period

LWOP period(s) of working period

Initials of Clerk

S-E-C-R-E-T

COMBINED HR OFFICE ACTION IN LIEU OF SF-52
CHANGE OF ETHNIC DESIGNATION
Effective Date - 22 April 1950

	<u>Name</u>	<u>Grade</u>	<u>D to DI</u>	<u>Name</u>	<u>Grade</u>
<u>FE</u>	ACANTONA, Julius	12		FRIAR, John R.	12
	CILLIS, Vincent A.	12			
	WATERS, Harry C., Jr.	11			
	WOODS, James S.	07		<u>FI</u>	
	MCCOY, Leonard V.	09		BECK, Marian F.	07
				ROY, Ruth R.	07
<u>EE</u>	MONTGOMERY, Hugh	12			
<u>SR</u>	TECICHAS, Aldona V.	07			
	KAPUSTA, Peter P.	11			
			<u>D to DS</u>		
<u>WE</u>	LOERS, Virginia	05			
			<u>D to DP</u>		
<u>HE</u>	McLAGHLIN, Mary S.	07			

RM - [Signature] by [Signature]
17 April 1950

S-E-C-R-E-T

SECRET

SECRET

UNVOUCHERED

7 APR
4/7/58
Dan

STANDARD FORM 52
FORM 52 OF THE
U. S. CIVIL SERVICE COMMISSION
PART 100 - PERSONNEL
GENERAL CHAPTER 1

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr - Miss - Mrs - One given name, initial(s), and surname) Mr. James S. WOODS	2. DATE OF BIRTH 20 Feb 28	3. REQUEST NO.	4. DATE OF REQUEST 21 Feb 54
--------------------------------------------------------------------------------------------------	--------------------------------------	----------------	----------------------------------------

5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Promotion	6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)	B. APPROVED: <i>Ops. OPR. (CO) APR 10 1955</i>	

FROM - 10 (FI) BFF 602.02-5 GS-0136.51- 45 \$3535.00 p/a	9. POSITION TITLE AND NUMBER 10. SERVICE GRADE AND SALARY 11. ORGANIZATIONAL DESIGNATIONS 12. HEADQUARTERS	TO - 10 (FI) BFF 502.02-7 GS-0136.51- 47 \$4200.00 p/a
DDP/FE Korea Mission Intelligence Division Positive Intelligence Branch Atsugi, Japan UNCONV. WARF. DIV.	10. ORGANIZATIONAL DESIGNATIONS Same Same Same Same Same	11. HEADQUARTERS Same Same Same Same Same
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)
Attached herewith are Job Description, Dispatch, and DD/P Personnel Data Sheet.

B. REQUESTED BY (Name and title) H. C. Clinkdale, FE Personnel Officer	D. REQUEST APPROVED BY Signature: _____ Title: _____
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) O. A. Feltow, FE I	

13. VETERAN PREFERENCE NONE <input type="checkbox"/> WAR <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SPT <input type="checkbox"/> DISAB. OTHER <input type="checkbox"/>	14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REPL <input type="checkbox"/>
15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> W	16. RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> O
17. APPROPRIATION FROM 6-3740-55-096 TO: Same	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes
	19. DATE OF APPOINTMENT AT FEDERAL'S (ASSIGNING ONLY)
	20. LEGAL RESIDENCE STATE: D.C.

21. STANDARD FORM 50 REMARKS
FORWARD TO DOJ DIRECTIVE
LETTER TO: 1/30/55
FILED
APR 4/10/55

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. LEIL. OR POS. CONTROL	<i>RF</i>	3/28/55	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			

F. APPROVED BY
R. A. Stricklin

SECRET

2/24/55
Sam

STANDARD FORM 52
MAY 1962 EDITION
GSA GEN. REG. NO. 27
5010-104-01
MANUAL CHAPTER 11

SECRET

REQUEST FOR PERSONNEL ACTION

UNFOUNDED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs. - One given name, initial(s), and surname) Mr. James S. WOODS	4. DATE OF BIRTH 20 Feb 28	2. REQUEST NO.	6. DATE OF REQUEST 28 Jan 55
3. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		5. EFFECTIVE DATE A. PROPOSED: 26 Oct 54	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		D. APPROVED: 26 Oct 1954	

FROM— IO (FI) BFF 602.02-5 GS-0136.51-45 3535.00 p/a 3535. DDP/FE Korean Mission Warfare Division Korea	9. POSITION TITLE AND NUMBER	TO— IO (FI) BFF 602.02-5 GS-0136.51-45 3535.00 p/a 3535. Same Same Same Same Atsugi, Japan
10. SERVICE, GRADE, AND SALARY	10. ORGANIZATIONAL DESIGNATIONS	11. HEADQUARTERS
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)
Subject arrived PCS Japan 26 Oct 54 per FKLA-5239 of 17 Nov 1954.

B. REQUESTED BY <i>[Signature]</i> H. C. CLINGSdale, FE Personnel Officer	D. REQUEST APPROVED BY <i>[Signature]</i> James P. Humphries (Ward)
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) O. A. FINLON, FE/A X9761	Title: FE/CMO 8 Feb 55

13. VETERAN PRECEDENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> WW2 <input checked="" type="checkbox"/> WW2 <input type="checkbox"/> DISAS OTHER	14. ANTI-COMMUNISM CLASSIFICATION ACTION NEW <input type="checkbox"/> EXIST <input type="checkbox"/> I.A. <input type="checkbox"/> RELE <input type="checkbox"/>
15. SEA RACE M <input type="checkbox"/> W <input type="checkbox"/>	16. APPROPRIATION FUND 6-3740-55-096 TO: Same
17. SUBJECT TO U.S. RETIREMENT ACT (YES-NO) Yes	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSORY ONLY) <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: D.C.

21. STANDARD FORM 50 REMARKS
[Handwritten notes: See concern for Division - 18 Feb 55, 2/24/55, Sam; E date per J. Martin - FE 2/24/55, Sam]

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CELL OR POS. CONTROL	<i>[Signature]</i>	2/17/55	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	<i>[Signature]</i>	2/17/55	
E.			

F. APPROVED BY
[Signature] **SECRET** *[Signature]*

1. Agency and organizational designation

2. Pay rate

3. Bio. No.

4. Emp. No.

5. Employee's name (and social security account number when appropriate)

6. **WYDE, James S.**

7. **135 0310**

PAY ROLL CHANGE DATA

	BASE PAY	OVERTIME	CROSS PAY	RET.	TAX	BOND	F. I. C. A.	NET PAY
7. Previous normal								
8. New normal								
9. For this period								

10. Remarks

11. Appropriation(s)

12. Prepared by

13. Audited by

14. Effective date

15. Date last adjustment

16. Old salary rate

17. New salary rate

18. Performance rating is satisfactory or better.

19. LWOP date (fill in appropriate spaces covering LWOP during following periods):

20. No excess LWOP Total excess LWOP

21. Signature of other authentication

22. Initials of Clerk

MIDWIFE DIVISION

6/1/53 **7/1/53** **9/1/53** **12/31/53**

135 0310 - I 54 3 12

SECRET

STANDARD FORM NO. 1126A—Revised
Form prescribed by Comp. Gen., U. S.
Nov. 8, 1950, General Regulation No. 102

PAY ROLL CHANGE SLIP—PERSONNEL COPY

[Signature]

CONFIDENTIAL

CENTRAL INTELLIGENCE AGENCY

STANDARD FORM 50
REV. APRIL 1961
PROMULGATED BY
U. S. CIVIL SERVICE COMMISSION
ON FEDERAL PERSONNEL MANUAL

NOTIFICATION OF PERSONNEL ACTION Conc. 26 Mar 1954 Jan

1. NAME (USE -- MRS. -- ONE GIVEN NAME, INITIAL(S), AND SURNAME) JAMES S. Woods		2. DATE OF BIRTH 20 Feb 1928	3. JOURNAL OR ACTION NO.	4. DATE 16 Apr 1954
5. It is to notify you of the following action affecting your employment:				
6. NATURE OF ACTION (USE STANDARD TERMINOLOGY) Assignment		8. LIFE IN EFFECT DATE B.O.B. 25 Apr 1954	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 USCA 403 j	
FROM		TO		
1. POSITION TITLE Anal. Analyst EP 469.08		2. POSITION TITLE DO (VI) EPF 602.02-5		
3. SERVICE, SERIES, GRADE, SALARY GS-0136-51-5 \$3410.00 per annum		3. SERVICE, SERIES, GRADE, SALARY GS-0136-51-5 \$3410.00 per annum		
10. ORGANIZATIONAL DESIGNATIONS W/VI Woods Integration Division Processing and Records Branch Identification Section		10. ORGANIZATIONAL DESIGNATIONS REP/VI Korean Mission Unconventional Warfare Division		
11. HEADQUARTERS Washington, D. C.		11. HEADQUARTERS Korea		
<input type="checkbox"/> FIELD	<input checked="" type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD OR DEPT.	<input type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
WHEN OTHER	1-PT. DISAB. OTHER	NEW	WKS	E.A. REAL
16. RACE		17. APPROPRIATION		18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)
	FROM: 4-2359-83 TO: 4-3740-55-006			Yes
		19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)		20. LEGAL RESIDENCE
				<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: D. C.
REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
"Transfer TO Unconventional Warfare FROM Vouchered Funds."				
<i>J. M. Cox Mc</i>				

4. PERSONNEL FOLDER COPY

4/16/54

CONFIDENTIAL

ADVICE PERFORMANCE RATING
Acty Assistant Director

CENTRAL INTELLIGENCE AGEN

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR - MRS - MISS - ORS GIVER NAME, INITIALS, AND SURNAME) Mr. James S. Woods	2. DATE OF BIRTH 20 Feb. 28	3. JOURNAL OR ACTION NO. 800	4. DATE 27 Feb. 54
------------------------------------------------------------------------------------------------	---------------------------------------	----------------------------------------	------------------------------

This is to notify you of the following action affecting your employment:

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) Reassignment	6. EFFECTIVE DATE 28 Feb. 54	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 USCA 503 j
-----------------------------------------------------------------------	----------------------------------------	-------------------------------------------------------------------

8. POSITION TITLE Intel. Analyst BY 569.08
9. SERVICE, SERIES, GRADE, SALARY GS-132-5 \$310.00 per annum
10. ORGANIZATIONAL DESIGNATIONS SI Staff SI Division Processing & Records Branch Consolidation Section
11. HEADQUARTERS Washington, D. C.
12. FIELD OR DEPTL <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL

13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WW <input type="checkbox"/> OTHER <input type="checkbox"/> SPT <input checked="" type="checkbox"/> 15-PONT DISAB <input type="checkbox"/> OTHER <input type="checkbox"/>	14. POSITION CLASSIFICATION ACTION GS-71
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------

15. SEX M	16. RACE W	17. APPROPRIATION FROM: 4-2509-23 TO: 5422	18. SUBJECT TO C. & RETIREMENT ACT (YES - NO) Yes	19. DATE OF AFFIDAVIT AFFIDAVIT (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
---------------------	----------------------	----------------------------------------------------------------	-------------------------------------------------------------	---------------------------------------------------	---------------------------------------------------------------------------------------------------

21. REMARKS This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.

ENTRANCE PERFORMANCE RATED
 Deputy Assistant Director For Personnel

PERSONNEL FOLDER COPY

CENTRAL INTELLIGENCE AGENCY

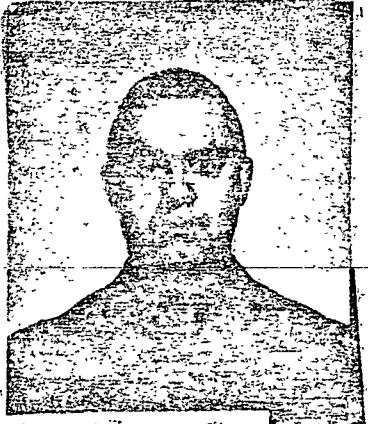
NOTIFICATION OF PERSONNEL ACTION

each

1. NAME (MR.—MRS.—MISS—ONE GIVEN NAME, INITIAL(S), AND SURNAME) Mr. James S. Woods		2. DATE OF BIRTH 20 February 1928	3. JOURNAL OR ACTION NO.	4. DATE 5 June 1953
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) Promotion		6. EFFECTIVE DATE 7 June 1953	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY Sch A-6, 116(b)	
FROM		TO		
8. POSITION TITLE Intel. Anal. EV-469.08-4		Same EV-469.08		
9. SERVICE, SERIES, GRADE, SALARY GS-132-4 \$3175.00 per annum		GS-132-3 \$3110.00 per annum		
10. ORGANIZATIONAL DESIGNATIONS DIR/FI Records Integration Staff Processing & Records Branch Consolidation Section Washington, D.C.		11. HEADQUARTERS Same Same Same Same		
12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE <input checked="" type="checkbox"/> NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> SPT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DEAD <input type="checkbox"/> OTHER		14. POSITION CLASSIFICATION ACTION CD-FI		
15. SEX M		16. RACE W		17. APPROPRIATION 118100 FROM: 3309-20 TO: Same
18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
EXTENSION 2027				
ENTRANCE PERFORMANCE RATING				
Chief, Personnel Division				

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS.—ONE OF THE NAME, INITIAL(S), AND SURNAME) Mr. James S. Woods		2. DATE OF BIRTH 20 Feb. 28	3. JOURNAL OR ACTION NO.	4. DATE 24 Apr. 53
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) Reassignment		6. EFFECTIVE DATE 26 Apr. 53	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY Schedule A-6.116(b)	
FROM Mail and File Clerk BV-304.00		8. POSITION TITLE Intnl. Anal. BV-469.00-1		
TO GS-4-305 \$3175.00 per annum		9. SERVICE SERIES, GRADE, SALARY GS-4-132 Same		
DDP/FI/RI		10. ORGANIZATIONAL DESIGNATIONS Same		
Processing and Records Br.		11. HEADQUARTERS Same		
Consolidation Section		12. FIELD OR DEPTL. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		
Washington, D.C.				
13. VETERAN'S PREFERENCE <input type="checkbox"/> NONE <input checked="" type="checkbox"/> WWI <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT DEAD: <input type="checkbox"/> OTHER: <input type="checkbox"/>		14. POSITION CLASSIFICATION ACTION REG. <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL: <input type="checkbox"/>		
15. SEX M	16. RACE W	17. APPROPRIATION 11K2100 2309-00 2309-20	18. SUBJECT TO C.S. RETIREMENT ACT (FPLS-40) YES	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) STATE DC
		20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input checked="" type="checkbox"/> PROVED		
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or annulled if it does not meet all requirements.				
ENTRANCE PERFORMANCE RATING: Chief, Personnel Division		 WOODS, JAMES S. 1921		

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MRS., MISS, ONE GIVEN NAME, INITIAL(S), AND SURNAME) Mr. James S. Woods		2. DATE OF BIRTH 20 Feb. 28	3. JOURNAL OR ACTION NO.	4. DATE 9 Mar. 53
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) Reassignment		6. EFFECTIVE DATE 15 Mar. 53	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY Schedule A-6.116(b)	
FROM File Clerk BY-356		TO Mail and File Clerk BY-364.08		
8. POSITION TITLE 03-4-305 \$3175.00 per annum DTP/FI/RI Processing and Records Br. File Section		9. SERVICE SERIES, GRADE, SALARY 03-4 SAME SAME Consolidation Section		
10. ORGANIZATIONAL DESIGNATIONS		11. HEADQUARTERS Washington, D.C.		
12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. OTHER <input type="checkbox"/>		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/>		
15. SEX M	16. RACE W	17. APPROPRIATION FROM: 11X2100 TO: 2309-20	18. SUBJECT TO C. S. RETIREMENT ACT (YLS-NO) YES	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY) 5/53
20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED				
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
ENTRANCE PERFORMANCE RATING Chief, Personnel Division				

U. S. GOVERNMENT PRINTING OFFICE 1952-210784

S-E-C-R-E-T
Security Information

COMBINED PERSONNEL ACTION

Page 9 of 36 pages

Used in lieu of SF-52 and/or SF-50 to document the following types of personnel actions involving no change in grade or salary: (a) Change in title (b) Change of position number (c) Reassignment within Division without series code change (d) Reassignment within Division with series code change. (Note: For action (type d) a SF-50 will be prepared for vouchered positions from information on this form.

(1) Staff or Division RI (2) Date T/O Approved 17 November 1952 (3) Effective Date of Action 7 Dec 52
FROM TO

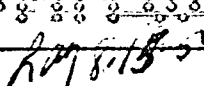
(1) NAME	(5) ORG. I.F. & POS. TITLE	(6) SCHEDULE S.E.I.S. Grade	(7) SLOT NOS.	(8) ACTION	(9) ORG. I.F. & POS. TITLE	(10) SCHEDULE S.E.I.S. Grade	(11) SLOT NOS.
Johnson, Dorothy A.	File Clerk	GS-4	X-32.03	A	File Supervisor	GS-305-4	BV-353.01
Walters, Erma D.	File Clerk	GS-4	X-34.02	B	File Clerk	GS-305-4	BV-354.
Hallinan, Martha M.	File Clerk	GS-4	X-34.	B	File Clerk	GS-305-4	BV-354.01
Cawdor, Carol A.	File Clerk	GS-4	X-38.02	B	File Clerk	GS-305-4	BV-354.02
Law, Lois	File Clerk	GS-4	X-38.03	B	File Clerk	GS-305-4	BV-354.03
Pruitt, Earl B.	File Supervisor	GS-5	X-33.	B	File Supvr.	GS-305-5	BV-355.
Service & Correspondence Section							
Woods, James	File Clerk	GS-4	X-302.22	B	File Clerk	GS-305-4	BV-354.01
File Section							
Lampace, Marie J.	File Clerk	GS-4	X-34.03	A	File Supervisor	GS-305-4	BV-357.
Riter, Irene M.	File Clerk	GS-4	X-32.02	B	File Clerk	GS-305-4	BV-358.
Iyddame, Mildred K.	File Clerk	GS-4	X-38.04	B	File Clerk	GS-305-4	BV-358.01
Ceppas, Loretta M.	File Clerk	GS-4	X-34.01	B	File Clerk	GS-305-4	BV-358.02

(12) APPROVED: [Signature] (13) APPROVED: [Signature] (14) APPROVED: [Signature]
Class & Wage Div. Personnel Div.

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

(ml)

1. NAME (MR--MISS--MRS--ONE GIVEN NAME, INITIALS, AND SURNAME) Mr. James S. Woods		2. DATE OF BIRTH 20 Feb. '28	3. JOURNAL OR ACTION NO.	4. DATE 14 Aug. '52
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERM, AGENCY) Promotion		6. EFFECTIVE DATE 17 Aug. '52	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY Schedule 6-1.16(h)	
FROM		TO		
8. POSITION TITLE File Clerk I-39.04 9. SERVICE SERIES, GRADE, SALARY GS-3-305 \$2950.00 per annum OSO RI Processing and Records Branch File Section 11. HEADQUARTERS Washington, D.C.		8. POSITION TITLE File Clerk I-102.22 9. SERVICE SERIES, GRADE, SALARY GS-4-305 \$3175.00 per annum OSO RI Analysis and Operations Branch Service and Correspondence Section 11. HEADQUARTERS Washington, D.C.		
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/>		NEW <input type="checkbox"/> VICE <input type="checkbox"/> I.A. <input type="checkbox"/> REAL <input type="checkbox"/>		
15. SEX M	16. RACE W	17. APPROPRIATION FROM: 11X2100	18. SUBJECT TO C. S. RETIREMENT ACT (YES--NO) NO	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY) 14 Aug 52
		20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: DC		
21. REMARKS: THIS ACTION IS SUBJECT TO APPLICABLE LAWS, RULES AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELLED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.				
Chief, Personnel Division ENTRANCE EFFICIENCY RATING:		SIGNATURE OR OTHER AUTHENTICATION 		

V.C. 26 March 1952
MCD

STANDARD FORM NO. 10 (PARTS)
REVISED 1950
PROMULGATED BY
CHAPTER 53, FEDERAL PERSONNEL MANUAL
U. S. CIVIL SERVICE COMMISSION

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1 NAME (MR.—MISS—MRS.—ONE GIVEN NAME INITIAL(S) AND SURNAME)		2 DATE OF BIRTH	3 JOURNAL OR ACTION NO	4 DATE
Mr. James S. Woods		20 Feb. 1928	157	21 Apr. '52
This is to notify you of the following action affecting your employment:				
5 NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6 EFFECTIVE DATE	7 CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Accepted Appointment		21 Apr. 1952	Sch. A — 6,116 (B)	
FROM		TO		
		8 POSITION TITLE	File Clerk GS - 3 139.04	
		9 SERVICE, SERIES, GRADE, SALARY	GS - 3 305 \$2950.00 per annum	
		10 ORGANIZATIONAL DESIGNATIONS	OSO RI PROCESSING AND RECORDS BRANCH FILE SECTION	
		11 HEADQUARTERS	Washington, D.C.	
<input type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL	12 FIELD OR DEPT'L	<input type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL
13 VETERAN'S PREFERENCE		14 POSITION CLASSIFICATION ACTION		
NONE	WWII	OTHER'S PT.	10 POINT	NEW
			PISAB. OTHER	VICA
				I.A.
				REAL
15 SEX	16 RACE	17 APPROPRIATION	18 SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19 DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)
M	W	FROM: 212300 TO: 3003	Yes	21 Apr. 1952
				20 LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
21. REMARKS: THIS ACTION IS SUBJECT TO ALL APPLICABLE LAWS, RULES AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELLED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.				
(39.04) This appointment is subject to a satisfactory trial period of one year. Subject to a satisfactory medical examination. 87 # 61 Affidavit executed. 3445				
DOE - 06/07/59 OSEOD - 04/27/52 LCD - 04/21/52				
PERSONNEL DIVISION				
SIGNATURE OR OTHER AUTHENTICATION				

CONFIDENTIAL
CLASSIFICATION

FITNESS REPORT

SECTION A

GENERAL INFORMATION

1. EMPLOYEE NUMBER 010032	2. NAME (Last, first, middle) WOODS, James S.	3. DATE OF BIRTH 02/20/28	4. SEX M	5. GRADE 12	6. SD D
7. OFFICIAL POSITION TITLE RECORDS ADMIN OFF CH		8. OFF. DIV./RR OF ASSIGNMENT DDO/CCS/REG	9. CURRENT STATION HQS		10. CODE (CS, I) <input checked="" type="checkbox"/> HQS <input type="checkbox"/> OF
11. TYPE OF APPOINTMENT			12. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input checked="" type="checkbox"/> ANNUAL	<input checked="" type="checkbox"/> REASSIGNMENT
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> OTHER	13. REPORTING PERIOD (FROM-TO) 01 July 76 - 08 July 77		14. DATE REPORT DUE IN O.P. 31 July 1977

SECTION B QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

NO

SECTION C PERFORMANCE EVALUATION

U—Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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 D.

M—Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

P—Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

S—Strong Performance is characterized by exceptional proficiency.

O—Outstanding 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.

SPECIFIC DUTIES

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 Chief of CCS Registry--Supervises employees in setting up and maintaining Staff files and necessary card indices; receiving, distributing and dispatching correspondence to and from the Staff; and processing requests for file traces and other information.	RATING LETTER O
SPECIFIC DUTY NO. 2 CCS Records Management Officer--Responsible for overall management of CCS records management program. Monitors developments in DDO records management policies and procedures; maintains liaison with ISS and DDO Records Management Officers; seeks improvement in CCS records organization and discipline.	RATING LETTER O
SPECIFIC DUTY NO. 3 Works with personnel responsible for developing and launching the CCS computerized records system (CENCO) to ensure proper integration of Registry Information.	RATING LETTER S
SPECIFIC DUTY NO. 4	RATING LETTER
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

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.

RATING LETTER
O

06/28/77

CONFIDENTIAL
CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

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 C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, where applicable, should be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

Mr. Woods continued to perform in outstanding fashion as Chief of the CCS Registry during an extremely busy period. The figures cited in the last Fitness Report as to the workload of the CCS Registry continued to be representative of the volume and variety of Mr. Woods' responsibilities. He supervised the work of six subordinates with a successful combination of patience and firm professionalism. He continued to be the source of sound, constructive suggestions for coping with the paper "explosion" occasioned by the investigations of CIA and the Freedom of Information and Privacy Acts. Mr. Woods is a highly valuable, reliable, unobtrusively effective records manager. In moving on to new responsibilities in an area division he leaves behind a solid record of achievement and the admiration of those with whom he has served in CCS.

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION <p style="text-align: center;">24</p>	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION.	
DATE <p style="text-align: center;">16 August 1977</p>	OFFICIAL TITLE OF SUPERVISOR <p style="text-align: center;">DC/CCS</p>	TYPED OR PRINTED NAME AND SIGNATURE <p style="text-align: center;"><i>Arthur C. Close</i> Arthur C. Close</p>

2. BY EMPLOYEE

I HAVE <input checked="" type="checkbox"/> OR HAVE NOT <input type="checkbox"/> ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.	DATE	SIGNATURE OF EMPLOYEE <p style="text-align: center;"><i>James S. Woods</i> James S. Woods</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------	------	------------------------------------------------------------------------------------------------------

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL <p style="text-align: center;">Mr. Close's evaluation of Mr. Woods' performance during the reporting period agrees completely with my observations and conclusions. Mr. Woods is a first-class professional records officer and supervisor who has clearly earned an overall rating of OUTSTANDING.</p>		
DATE <p style="text-align: center;">17 August 1977</p>	OFFICIAL TITLE OF REVIEWING OFFICIAL <p style="text-align: center;">Chief, Central Cover Staff</p>	TYPED OR PRINTED NAME AND SIGNATURE <p style="text-align: center;"><i>Eric W. Isenstead</i> ERICH W. ISENSTEAD</p>

4. BY EMPLOYEE

I CERTIFY I HAVE SEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT. I HAVE <input type="checkbox"/> HAVE NOT <input type="checkbox"/> ATTACHED A STATEMENT CONCERNING THE REVIEWING OFFICIAL'S EVALUATION OF MY PERFORMANCE.	DATE <p style="text-align: center;">1977 18 Aug</p>	SIGNATURE OF EMPLOYEE <p style="text-align: center;"><i>James S. Woods</i> James S. Woods</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------	------------------------------------------------------------------------------------------------------

CLASSIFICATION
CONFIDENTIAL

CONFIDENTIAL
CLASSIFICATION

FITNESS REPORT

SECTION A

GENERAL INFORMATION

1. EMPLOYEE NUMBER 010032	2. NAME (Last, first, middle) WOODS James S.	3. DATE OF BIRTH 02/20/28	4. SEX M	5. GRADE GS-12	6. DU DAC
7. OFFICIAL POSITION TITLE RECORDS ADMIN OF CH		8. OFF/DIV/HR OF ASSIGNMENT DDO/CCS/REG	9. CURRENT STATION HQS		10. CODE (C.R. I.) X HQS. DF
11. TYPE OF APPOINTMENT			12. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> OTHER	13. REPORTING PERIOD (FROM-TO) 1 July 1975-30 June 1976		14. DATE REPORT DUE IN O.P. 30 July 1976

SECTION B

QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

NO

SECTION C

PERFORMANCE EVALUATION

U--Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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 D.

M--Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

P--Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

S--Strong Performance is characterized by exceptional proficiency.

O--Outstanding 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.

SPECIFIC DUTIES

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 Chief of Registry Section--supervises 6 employees in maintenance of Staff files and required card indices; receiving and distributing Staff correspondence; and processing requests for file checks and other information	RATING LETTER S
SPECIFIC DUTY NO. 2 Records Management Officer--responsible for the overall CCS records management program	RATING LETTER O
SPECIFIC DUTY NO. 3	RATING LETTER
SPECIFIC DUTY NO. 4	RATING LETTER
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

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.

RATING LETTER
O

CONFIDENTIAL
CLASSIFICATION

SECTION D	NARRATIVE COMMENTS
<small>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 C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.</small>	
<p>Mr. Woods is a quiet, highly effective manager of a major repository of records within the DDO. The workload of his Section is staggering: over 8,000 documents filed each month, over 500 index cards prepared each month; close to 300 Freedom of Information or Privacy Act requests processed each month, etc. Mr. Woods organizes his Section well; he handles a group of six women with skill and understanding and he heads, as a result, a harmoniously working team.</p> <p>Mr. Woods approaches problems with a positive attitude and brings his considerable experience and imagination to bear with appropriate initiative and follow-through. His response to the exceptionally heavy workload of the Staff over the past year of Congressional investigations and cover exposes was vital to the Staff's and the DDO's requirements for current and historical records. He volunteers ideas designed to improve the Staff's records; he works weekends and after hours to keep ahead of a growing avalanche of paper and requests for information. He is, in sum, a highly competent, knowledgeable, yet flexible records manager upon whom the Staff relies heavily.</p>	

SECTION E			CERTIFICATION AND COMMENTS		
1. BY SUPERVISOR					
<small>MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION</small>	12	<small>IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION</small>			
<small>DATE</small>	27 July 1976	<small>OFFICIAL TITLE OF SUPERVISOR</small>	DC/CCS	<small>TYPED OR PRINTED NAME AND SIGNATURE</small> <i>Arthur C. Close</i> Arthur C. Close	
2. BY EMPLOYEE					
<small>I HAVE <input type="checkbox"/> OR HAVE NOT <input type="checkbox"/> ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.</small>		<small>DATE</small>	27 July 76	<small>SIGNATURE OF EMPLOYEE</small> <i>James S. Woods</i>	

3. BY REVIEWING OFFICIAL					
<small>COMMENTS OF REVIEWING OFFICIAL</small>					
<p>I have no difficulty in agreeing with the letter ratings and the narrative evaluation in the above report. Mr. Woods established the high level of his professional competence very soon after his assignment in CCS and has maintained this standard without interruption. I again must emphasize his abilities as supervisor in one of the toughest supervisory assignments known to me. With a Registry Chief like Mr. Woods, it is easy to come to the conclusion that running a registry of the complexity and volume as that of CCS is a cinch - at least he makes it appear that way.</p>					
<small>DATE</small>	29 July 1976	<small>OFFICIAL TITLE OF REVIEWING OFFICIAL</small>	Chief, CCS	<small>TYPED OR PRINTED NAME AND SIGNATURE</small> <i>Erich W. Isenstead</i> Erich W. Isenstead	
4. BY EMPLOYEE					
<small>I CERTIFY I HAVE SEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT. I HAVE <input checked="" type="checkbox"/> OR HAVE NOT <input type="checkbox"/> ATTACHED A STATEMENT CONCERNING THE REVIEWING OFFICIAL'S EVALUATION OF MY PERFORMANCE.</small>		<small>DATE</small>	29 July	<small>SIGNATURE OF EMPLOYEE</small> <i>James S. Woods</i> James S. Woods	

CONFIDENTIAL
CLASSIFICATION

SECRET
CLASSIFICATION

FITNESS REPORT

SECTION A		GENERAL INFORMATION			
1. EMPLOYEE NUMBER 010032	2. NAME (Last, first, middle) Woods, James S.	3. DATE OF BIRTH 02/20/28	4. SEX M	5. GRADE GS-12	6. SD DAC
7. OFFICIAL POSITION TITLE Records Admin OF-CH		8. OFF/DIV/BR OF ASSIGNMENT DDO/CCS/REG	9. CURRENT STATION HQS		
11. TYPE OF APPOINTMENT			12. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec.)	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> ANNUAL
13. REPORTING PERIOD (from-to) 1 January 1975 - 30 June 1975			14. DATE REPORT DUE IN O.P. 31 July 1975		

SECTION B QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C PERFORMANCE EVALUATION

U - Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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 D.

M - Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

P - Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

S - Strong Performance is characterized by exceptional proficiency.

O - Outstanding 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.

SPECIFIC DUTIES

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 Chief of Registry Section - supervises 7 employees	RATING LETTER S
SPECIFIC DUTY NO. 2 Records Management Officer - responsible for the overall CCS records management program, ensuring that it is in conformity with DDO and Agency records management policy and procedures.	RATING LETTER O
SPECIFIC DUTY NO. 3	RATING LETTER
SPECIFIC DUTY NO. 4	RATING LETTER
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

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 aptly reflects his level of performance.

RATING LETTER
S

SECRET
CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

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 C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

JUL 8 11 25 AM '75

During the 6 months under review Mr. Woods has continued to fulfill his responsibilities in the same excellent manner which has been documented in his last two fitness reports and which led to his promotion to GS-12. Mr. Woods surefootedness as a records officer and manager of people, together with ability to take necessary initiatives where actions are required and his maturity and sound judgement, make him an ideal chief of this very active and complex registry and records management office. I dread to think that eventual rotation will deprive me of the services of this extraordinarily competent and effective officer.

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION
1 year, 9 months

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE
7 July 1975

OFFICIAL TITLE OF SUPERVISOR
Chief, CCS

TYPED OR PRINTED NAME AND SIGNATURE
Erich W. Isenstead
Erich W. Isenstead

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE
HAVE ATTACHED HAVE NOT ATTACHED

DATE
7 July 1975

SIGNATURE OF EMPLOYEE
James S. Woods
James S. Woods

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

There is no one in the chain of command who could act as reviewing officer.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

4. BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT

DATE
7 July 1975

SIGNATURE OF EMPLOYEE
James S. Woods
James S. Woods

CLASSIFICATION
SECRET

CLASSIFICATION

FITNESS REPORT										
SECTION A GENERAL INFORMATION										
1. EMPLOYEE NUMBER 010032		2. NAME (Last, first, middle) WOODS, JAMES S.			3. DATE OF BIRTH 02/20/28		4. SEX M	5. GRADE & SD GS-12 D		
7. OFFICIAL POSITION TITLE RECORDS ADMIN OF-CH				8. OFF/DIV/BR OF ASSIGNMENT DDO/CCS/REGISTRY		9. CURRENT STATION HEADQUARTERS		10. CODE (4-6)	X MOB	DP
11. TYPE OF APPOINTMENT					12. TYPE OF REPORT					
X CAREER	RESERVE	CONTRACT	OTHER (Spec.)	TEMPORARY	ANNUAL	REASSIGNMENT	X SPECIAL			
13. REPORTING PERIOD (from-to) 1 June 1974-31 December 1974					14. DATE REPORT DUE IN O.P. 31 January 1974 (Retirement of Supervisor)					
SECTION B QUALIFICATIONS UPDATE										
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.										
SECTION C PERFORMANCE EVALUATION										
<u>U-Unsatisfactory</u>	Performance is unacceptable. A rating in this category requires immediate and 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 D.									
<u>M-Marginal</u>	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.									
<u>P-Proficient</u>	Performance is satisfactory. Desired results are being produced in the manner expected.									
<u>S-Strong</u>	Performance is characterized by exceptional proficiency.									
<u>O-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.									
SPECIFIC DUTIES										
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 Chief of Registry Section - supervises seven employees								RATING LETTER S		
SPECIFIC DUTY NO. 2 Records Management Officer - responsible for the overall CCS records management program, ensuring that it is in conformity with DDO and Agency records management policy and procedures.								RATING LETTER O		
SPECIFIC DUTY NO. 3 CCS Security Officer - Briefs all new and departing CCS employees on Agency and CCS security procedures. Also responsible for duty rosters and related security instructions, and maintains liaison with the Office of Security - through 6 October 1974.								RATING LETTER S		
SPECIFIC DUTY NO. 4								RATING LETTER		
SPECIFIC DUTY NO. 5								RATING LETTER		
SPECIFIC DUTY NO. 6								RATING LETTER		
OVERALL PERFORMANCE IN CURRENT POSITION										
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.								RATING LETTER S		

FORM 45 OBSOLETE PREVIOUS EDITIONS

CLASSIFICATION
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CLASSIFICATION

SECTION D	NARRATIVE COMMENTS
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 C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.	
<p>Since his last Fitness Report, in June 1974, Mr. Woods has continued his extremely fine performance as a conscientious, hardworking and thoughtful records manager and registry supervisor. The CCS registry workload remains at about the same level as previously reported, and Mr. Woods regularly works an hour or so of uninterrupted overtime every working day personally reorganizing procedures, cleaning out, consolidating, and retiring files. His enthusiastic determination in reducing the numbers of out-of-date and no longer useful files is most exemplary. Knowing the numbers of primary and supplemental files involved in this exercise, and as a retiring supervisor, I can only wish him "good luck"!</p> <p>Mr. Woods also continues eager to learn and use new methods and techniques. During this reporting period, in July 1974, he took the Agency course "Introduction to Micrographics Seminar #2."</p> <p>Finally it gives me pleasure to note here that, effective ²⁴ 11 November 1974, Mr. Woods will be given a well deserved promotion from GS 11/6 to GS 12/3.</p>	

SECTION E CERTIFICATION AND COMMENTS		
1. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
15 months		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
20 November 1974	Deputy Chief, CCS	<i>Carter H. Yates</i> Carter H. Yates
2. BY EMPLOYEE		
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
HAVE ATTACHED <input checked="" type="checkbox"/> HAVE NOT ATTACHED	20 Nov 74	<i>James S. Woods</i> James S. Woods
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
<p>Both Mr. Yates' letter ratings and narrative comments accurately reflect the quality of Mr. Woods' performance during the reporting period. He is a thoroughgoing professional records officer who uses his extensive experience and his good judgement to take initiatives toward improving the Registry service and the management of records. Hand in hand with his high substantive competence goes his excellent ability as a supervisor. I can say nothing more laudable in this regard than that I have not had to deal with Registry personnel problems during the last year. He knows the job that needs to be done and so do his people. With this kind of leadership, the work gets accomplished with a high state of morale.</p>		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
25 November 1974	Chief, Cover and Commercial Staff	<i>Erich W. Isenstead</i> Erich W. Isenstead
4. BY EMPLOYEE		
I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT	DATE	SIGNATURE OF EMPLOYEE
	25 Nov 74	<i>James S. Woods</i>

CLASSIFICATION
SECRET

SECRET
CLASSIFICATION

FITNESS REPORT										
SECTION A GENERAL INFORMATION										
1. EMPLOYEE NUMBER 010032		2. NAME (last, first, middle) WOODS, JAMES S.			3. DATE OF BIRTH 02/20/28		4. SER. N	5. GRADE GS-11	6. DD D	
7. OFFICIAL POSITION TITLE RECORDS ADMIN OF - CH				8. OFF/DIV/BR OF ASSIGNMENT DDO/CCS/REGISTRY		9. CURRENT STATION HEADQUARTERS		10. CODE (18 940) X HQB DP		
11. TYPE OF APPOINTMENT					12. TYPE OF REPORT					
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec.)	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/>	<input type="checkbox"/> SPECIAL	<input type="checkbox"/>	
13. REPORTING PERIOD (from-to) 1 June 1973 - 31 May 1974					14. DATE REPORT DUE IN O.P. 30 June 1974					
SECTION B QUALIFICATIONS UPDATE										
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.									NO	
SECTION C PERFORMANCE EVALUATION										
<p>U—Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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 D.</p> <p>M—Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.</p> <p>P—Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S—Strong Performance is characterized by exceptional proficiency.</p> <p>O—Outstanding 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>										
SPECIFIC DUTIES										
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).									RATING LETTER	
SPECIFIC DUTY NO. 1 Chief of Registry Section - supervises seven employees.									S	
SPECIFIC DUTY NO. 2 Records Management Officer - responsible for the overall CCS records management program, ensuring that it is in conformity with DDO and Agency records management policy and procedures.									O	
SPECIFIC DUTY NO. 3 CCS Security Officer - Briefs all new and departing CCS employees on Agency and CCS security procedures. Also responsible for duty rosters and related security instructions, and maintains liaison with the Office of Security.									S	
SPECIFIC DUTY NO. 4									RATING LETTER	
SPECIFIC DUTY NO. 5									RATING LETTER	
SPECIFIC DUTY NO. 6									RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION										
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.									RATING LETTER S	

SECRET
CLASSIFICATION

SECTION D NARRATIVE COMMENTS

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 C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment, and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

After a short overlap with his predecessor, Mr. Woods assumed his responsibilities as Chief of Registry, CCS, on 3 October 1973 - roughly nine months ago. In this position he is responsible, overall, for CCS registry and records management activities, including the supervision of seven other individuals. As could be expected from even a casual reading of his past fitness reports, Mr. Woods quickly took hold, and has been performing his new responsibilities in an exemplary manner. Despite the volume and variety of files with which he was required to become familiar, early on he systematically began cleaning out, consolidating, and retiring files as appropriate, reorganizing and updating the indexing system for individual and project files, and redistributing employee workloads. He also reorganized the placement of file machinery, desks, and service counter to achieve greater employee comfort and efficiency in the utilization of personnel. Although his task as Staff Security Officer is a secondary function, he also reorganized, simplified and re-wrote the security check and duty officer roster procedures.

Indicative of the work which he supervises are selected Registry statistics for May 1974: 7015 documents filed, 8200 files pulled (and re-filed) for Staff officers' use, 6642 cables processed and distributed, 9900 facility and name searches, 2353 documents logged, 833 index cards made and filed, and 200 new files opened. During his nine months with CCS, Mr. Woods not only has had to learn the CCS "system" himself,

SECTION E CERTIFICATION AND COMMENTS

1. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
10 mos		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
25 June 1974	DC/CCS	<i>Carter H. Yates</i> Carter H. Yates
2. BY EMPLOYEE		
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
<input type="checkbox"/> HAVE ATTACHED <input checked="" type="checkbox"/> HAVE NOT ATTACHED	25 June 74	<i>James S. Woods</i> James S. Woods
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
In the relatively short period of his assignment to CCS, Mr. Woods has completely lived up to his advance billing as reflected in past fitness reports. Mr. Yates has provided the specifics of Mr. Woods' accomplishments and has left me only to say that Mr. Woods is a first class professional Records Officer and supervisor who fully deserves an overall rating of Strong.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
<i>1 Aug</i>	C/CCS	<i>Erich W. Isenstead</i> Erich W. Isenstead
4. BY EMPLOYEE		
INDICATE THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT.	DATE	SIGNATURE OF EMPLOYEE
	1 July 74	<i>James S. Woods</i>

CLASSIFICATION
SECRET

SECRET

Fitness Report Woods, James D. 010032

SECTION D NARRATIVE COMMENTS (continued)

but has been required, due to a turnover in personnel, to train three new Records Clerks.

Courses taken since the start of his tour with CCS include Operational Records I and III, ADP I, Forms Management Seminar, and Forms Analysis and Design Workshop.

Mr. Woods has proved to be a conscientious, hard-working and thoughtful records manager and supervisor, and CCS is glad to have him aboard. I am sure that the next records inventory will provide statistical evidence of his abilities as a "housecleaner."

SECRET

SECRET

(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						010032	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
Woods, James S.			20 Feb 28	M	GS-11	D	
6. OFFICIAL POSITION TITLE			7. OFF. DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Records Admin Officer			DDO/EUR		Rome		
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 checked="" type="checkbox"/> X	<input type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> X	<input type="checkbox"/> ANNUAL	<input checked="" type="checkbox"/> X	<input 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-)			
				1 June 72 -31 May 73			
SECTION B PERFORMANCE EVALUATION							
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding 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>							
SPECIFIC DUTIES							
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	
Station Records Management and Control Officer - responsible for the mediation, preparation, implementation and control of the Records Management Program.						O	
SPECIFIC DUTY NO. 2						RATING LETTER	
Chief of Registry Section - in this capacity he supervises one employee in the processing and pouching of all dispatch and other correspondence; serves as the cable analyst, processing and distributing all cable traffic; and serves as Top Secret Control Officer.						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
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.						RATING LETTER	
						O	

0 MAY 1972

SECRET

SECRET

(When filled in)

SECTION C		NARRATIVE COMMENTS	
<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. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p>This officer has continued to perform with a high degree of effectiveness and accomplishment. He has concentrated on improving our records holding standards and on purging irrelevant and outdated files. In May 1972 he began a monthly series of progress reports for the Chief of Station outlining the month's accomplishments. Copies of these reports through January 1973 were sent to Hqs in OIRT-18014 and 18015, dated 9 Feb 73. These reports clearly show this officer's focus on records management activities, his ingenuity and aggressiveness in launching programs of review of files and his tireless efforts in reducing Station holdings to a practical and useable minimum. His records inventory as of September 1972, reporting a total reduction in excess of 85 feet, speaks for itself. His next report also promises to show dramatic reductions.</p> <p>This officer shows a sense of professional responsibility and determination in the oft neglected function of records management, deeper and more intense than any other witnessed by the rating officer in his career. He performs his other duties as Chief, Registry with an equally high degree of effectiveness. Subject officer may have been inadvertently hiding his talents under the proverbial bushel basket by having remained in the field for so long. It is the rater's hope that Hqs now has focused on him and has discovered his potential for greater responsibilities. The records in this Station are tremendously improved for his having had a tour in Rome. We are certainly glad he came.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, D, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
30 April 1973	/s/ James S. Woods		
2. BY SUPERVISOR			
MONTHS EMPLOYER 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 May 1973	Admin Officer	/s/ Thomas McKinley	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>This officer has been remarkably effective during his tour in Rome. While we are very sorry to lose him, there is no question that his formidable talents should be used on a much broader range of records management and related problems than could be done in this Station. His next assignment in Headquarters appears to give him that additional scope. We are glad that he served in Rome and that during this tour here he received a well-deserved promotion. Rome Station's records have improved considerably as a result of this officer's tour here. I am in full agreement with the above comments and ratings.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
23 May 1973	Ops Officer	/s/ William Acon, Jr.	

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SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
					010032	
SECTION A GENERAL						
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
Woods, James S.			20 Feb 28	M	GS-10	D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Records Admin Officer			DDP/EUR/I		Rome	
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 checked="" type="checkbox"/>	ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):			SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)			
31 July 1972			1 October 1971 - 31 May 1972			
SECTION B PERFORMANCE EVALUATION						
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding 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>						
SPECIFIC DUTIES						
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	
Chief of Registry Section - In this capacity he supervises one employee in the processing and pouching of all dispatch correspondence and in the performance of other registry duties.					O	
SPECIFIC DUTY NO. 2					RATING LETTER	
Station Records Officer - Responsible for the Station's Record Management Program.					O	
SPECIFIC DUTY NO. 3					RATING LETTER	
Cable Analyst - Processes and distributes all incoming and outgoing cable traffic.					S	
SPECIFIC DUTY NO. 4					RATING LETTER	
Top Secret Control Officer.					S	
SPECIFIC DUTY NO. 5					RATING LETTER	
SPECIFIC DUTY NO. 6					RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION						
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.					RATING LETTER	
					O	

21 AUG 1972

GROUP 1 Excluded from automatic downgrading and declassification

SECRET

(When Filled In)

SECTION C NARRATIVE COMMENTS

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. Worth of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

This officer's performance over the past year has been outstanding. He is a skilled professional records manager, an indefatigable worker and a highly imaginative and efficient supervisor. Since his last Fitness Report he has directed a TDY team of records officers in a concentrated program of records reduction. He devised the program and supervised its execution with most effective results. This officer is a driver and a doer. He constantly strives to improve the Station's records management posture and follows up with procedures designed to maintain the gains achieved by his efforts. It is highly gratifying and stimulating to work with him. He sees the broad dimensions of the task at hand and focuses constantly on improving the system. This quality convinces the rater that he is capable of greater responsibilities in a position of broader scope. I recommend that Headquarters begin to plan for the utilization of this officer on the completion of his tour of duty in Rome. He should be placed in a Headquarters position in which his skills and broad experience can be fully used and in which he can achieve the professional growth of which he is both capable and deserving.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
17 July 1972	/s/ James S. Woods

2. BY SUPERVISOR

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
17 July 1972	Admin Officer	/s/ Thomas McKinley

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur in the comments of the rating officer and believe the overall outstanding rating is well deserved. Subject is a first-rate Records Management officer - deeply interested in his work, conscientious in the extreme and always looking for an innovative approach that will upgrade the functioning of Registry and better serve Station needs. Without losing sight of the unending pressure to reduce and periodically reorder the Station's holdings, this officer avoids assuming attitudes that are cast in cement. He works with the Branches and individual officers in solving problems rationally. He is unfailingly pleasant and courteous and is well-liked by all. The Station is fortunate to have

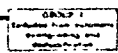
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
25 July 1972	DCOS	/s/ Joseph A DiStefano

SECRET

ON DUTY

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				010032			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle) Woods, James S.			2. DATE OF BIRTH 20 Feb. '28	3. SEX M	4. GRADE GS-10	5. SD D	
6. OFFICIAL POSITION TITLE Records Admin Off			7. OFF/DIV/BR OF ASSIGNMENT DDP/EUR/I		8. CURRENT STATION Rome		
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"/>	CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/>	ANNUAL	<input type="checkbox"/>	REASSIGNMENT SUPERVISOR
<input type="checkbox"/>	SPECIAL (Specify):			<input type="checkbox"/>	SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From to-) 4 July 1971-30 September 1971			
SECTION B				PERFORMANCE EVALUATION			
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding 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>							
SPECIFIC DUTIES							
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	
Chief of Registry Section - In this capacity he supervises one employee in the processing and pouching of all dispatch correspondence and other registry duties.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Station Records Officer - Responsible for the Station's record program and to give guidance and/or assist the Station officers when called upon to do so.						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
Cable Analyst - Process and distribute all incoming and outgoing cable traffic, this includes maintenance of the chrono files.						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Top Secret Control Officer.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION						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	



SECRET

(When Filled In)

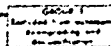
SECTION C			NARRATIVE COMMENTS		
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p>					
<p>I have worked with this officer just 2½ months, but this has been long enough to satisfy me that he is above average in registry work. He is a very knowledgeable registry technician, but most important, he is aggressive and imaginative in devising new procedures, or revising old ones to improve the quality of registry service to this Station. He is affable in dealing with his peers and confident and persuasive in dealing with the senior management of this Station. Shortly after his arrival he took over the analysing and distribution of the cables, and prepared a Station procedure for this purpose. Immediately following that, he devised a new procedure for handling correspondence and installed it. He had reviewed the multitudinous files at this Station and has plans to trim them back to more reasonable and appropriate dimensions. In every respect, this officer has taken charge of the function he is here to perform, and has devoted a great deal of time, thought and effort to improve it. We are indeed satisfied with his performance.</p>					
SECTION D			CERTIFICATION AND COMMENTS		
1. BY EMPLOYEE					
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT					
DATE	SIGNATURE OF EMPLOYEE				
4 October 1971	/s/ James S. Woods				
2. BY SUPERVISOR					
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION				
2½ months					
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE			
4 October 1971	Chief, Support	/s/ Thomas McKinley			
3. BY REVIEWING OFFICIAL					
COMMENTS OF REVIEWING OFFICIAL					
Since I have just arrived at the Station I have not had an opportunity to observe this officer's performance. However, I respect the rating officer's judgment, which in this case coincides with other favorable comments I have heard about the Subject. I therefore defer to the rating officer's evaluation.					
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE			
4 October 1971	Deputy Chief of Station	/s/ Joseph A. Distefano			

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						010032	
SECTION A GENERAL							
1. NAME <i>(Last) (First) (Middle)</i> WOODS James S			2. DATE OF BIRTH 20 Feb. 1923	3. SEX M	4. GRADE GS-10	5. SD D	
6. OFFICIAL POSITION/TITLE Records Adm. Officer				7. OFF/DIV/BR OF ASSIGNMENT DDP/EUR/Italian		8. CURRENT STATION Rome, Italy	
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 type="checkbox"/> REASSIGNMENT EMPLOYEE		<input checked="" type="checkbox"/> ANNUAL		<input checked="" type="checkbox"/> SPECIAL (Specify): Promotion	
11. DATE REPORT DUE IN U.P.				12. REPORTING PERIOD (From - To) 1 January 1971 - 30 May 1971			
SECTION B PERFORMANCE EVALUATION							
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding 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>							
SPECIFIC DUTIES							
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 Reviewed, retired and rationalized Italian Branch Files and explained same system to Branch personnel						RATING LETTER O	
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	
OVERALL PERFORMANCE IN CURRENT POSITION							
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.						RATING LETTER O	

3 AUG 1971



SECRET

(When Filled In)

SECTION C	NARRATIVE COMMENTS
<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 Authority of Managerial or Supervisory Duties and Cost Consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable.</u> If extra space is needed to complete Section C, attach a separate sheet of paper.</p>	
<p>Mr. Woods first made a survey of the Augean stable that the Italian Branch files had become over many years of shifts in personnel and changes of direction. He then reviewed, downgraded, and retired approximately 350 Top Secret documents with appropriate Project and Subject files and copies destroyed. At the completion of this there was not one Top Secret document on the Branch. He devised, gained approval from FI/D, and carried out a new procedure for the downgrading of TYLOTE material from Top Secret to Secret so that it could be retired. He retired approximately 60 Project, 25 Subject, and fifty 201 files. He surveyed the Communist Party of Italy files and discovered that there were a total of 93 of which 19 were already closed. He closed 47 of the remainder and left 25 open and arranged for RID/ARD to retire all the material in the open files prior to 1 January 1971. He closed and retired Plan files dating back to the early 1950's. All in all, out of 76 feet of safe space filled with CS material, he retired 36 feet of files leaving a catalogue of where everything is or has been sent. A remarkable record (and done with a minimum of fuss and Branch dislocation)!</p> <p>What he did in such a short time speaks eloquently of how he went about his duties for which see the accompanying memorandum of recommendation for promotion. Reporting officer has known him over fourteen years and has the unvarying impression of him as a quietly competent, diligent, reliable, self-reliant individual.</p> <p style="text-align: right;">/continued/</p>	

SECTION D			CERTIFICATION AND COMMENTS
1.			BY EMPLOYEE
DATE			SIGNATURE OF EMPLOYEE
			Subject now in Rome Station
2.			BY SUPERVISOR
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
4 months	See above		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
27 July 1971	ADC/EUR/Italy	R. Campbell James	
3.			BY REVIEWING OFFICIAL
COMMENTS OF REVIEWING OFFICIAL			
I concur in the above evaluation. Subject turned in a most impressive performance during his brief time on the Italian Branch. Largely as a result of his enthusiasm and initiative, the Branch was able to achieve what had never been accomplished before; a complete overhaul, cleaning, purging, and restructuring of its filing system. To his credit, Subject has a keen appreciation for operational requirements and all of this work was done without sacrificing the future utilization of information acquired in the past; on the contrary, the efficient use of this material has been so enhanced that it will surely be reflected in our future operations. Mr. Woods has a unique contribution to make in Rome or any other place he is assigned. The Station is fortunate to have him...his presence is sorely needed to do the same thing in Rome that he has just accomplished			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
27 July 1971	Chief/Italian Branch	Herschel F. Peak	

SECRET

SECRET

-2-

You give him a job and need not worry about whether or how it will be done.

The job offered no opportunity to observe his supervisory capabilities. He is cost conscious and security conscious.

Fitness Report

James S. Woods

(continued)

SECTION D.3. (continued).

in Headquarters. The importance of his contribution and his personal initiative and efforts should be rewarded by a promotion.

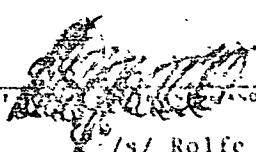
SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				010032	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) Woods, James S.			2. DATE OF BIRTH 20 Feb 23	3. SEX M	4. GRADE 5. SD GS-10 D
6. OFFICIAL POSITION TITLE Recs Adm Off			7. OFF/DIV/BR OF ASSIGNMENT DDP/EUR/BCR		8. CURRENT STATION London
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
	CAREER-PROVISIONAL (See Instructions - Section C)		<input checked="" type="checkbox"/> ANNUAL	<input checked="" type="checkbox"/>	REASSIGNMENT EMPLOYEE
	SPECIAL (Specify):		SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P. 30 November 1970			12. REPORTING PERIOD (From to) 30 June 1970 - 18 November 1970		
SECTION B PERFORMANCE EVALUATION					
<u>U-Unsatisfactory</u>	Performance is unacceptable. A rating in this category requires immediate and 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.				
<u>M-Marginal</u>	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.				
<u>P-Proficient</u>	Performance is satisfactory. Desired results are being produced in the manner expected.				
<u>S-Strong</u>	Performance is characterized by exceptional proficiency.				
<u>O-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.				
SPECIFIC DUTIES					
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 Responsible for organization and direct management of the Station Registry					RATING LETTER S
SPECIFIC DUTY NO. 2 First-line supervisor for two full-time registry assistants.					RATING LETTER S
SPECIFIC DUTY NO. 3 Organizes and implements review and purge of Registry and other Station files.					RATING LETTER O
SPECIFIC DUTY NO. 4 Prepares Station notices and outgoing correspondence on Registry matters.					RATING LETTER S
SPECIFIC DUTY NO. 5 Maintains and controls case file index and 201 file index.					RATING LETTER S
SPECIFIC DUTY NO. 6 Top Secret Control Officer					RATING LETTER S
OVERALL PERFORMANCE IN CURRENT POSITION					
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.					RATING LETTER S

SECRET

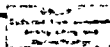
(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<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>Quality of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable.</u> If extra space is needed to complete Section C, attach a separate sheet of paper.</p>			
<p>In the four months he has been under my supervision, Subject has demonstrated that he merits in full measure the high opinion of him held by his previous supervisor. Conscientious, careful, fully knowledgeable of Registry procedures he has gone about his day-to-day tasks in an exceptionally proficient way without the need for constant supervision. He is prompt in his response to requests and has an excellent sense of "get the job done". He is an intelligent and concerned supervisor who has been meticulous in keeping his supervisors briefed on personnel and other problems as they have arisen in the Station Registry. He appears fully capable of assuming larger responsibilities in the records field. The rating officer regrets that Subject's family situation precludes his staying for another tour.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
17 Nov 1970	James S. Woods		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
4 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
17 November 1970	DCOS	/s/ Cameron J. LaClair	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Although the rating officer is newly arrived in London, he has had numerous opportunities in the past to observe Subject's work and the results he has achieved in reducing London files to manageable proportions. As a result the ratings awarded in this report are endorsed without hesitation.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	SIGNATURE AND SIGNATURE	
23 November 1970	COS	 /s/ Rolfe Kingsley	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				010032			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) Woods, James S.			2. DATE OF BIRTH 20 Feb. 23	3. SEX M	4. GRADE GS-10	5. SD D	
6. OFFICIAL POSITION TITLE Records Admin Off			7. OFF/DIV/BR OF ASSIGNMENT DDP/EUR/BCR		8. CURRENT STATION London		
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
CAREER		RESERVE		TEMPORARY		INITIAL	
CAREER-PROVISIONAL (See Instructions - Section C)				ANNUAL		X REASSIGNMENT SUPERVISOR	
SPECIAL (Specify)				SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to) 1 October 1969 - 30 June 1970			
SECTION B PERFORMANCE EVALUATION							
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding 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>							
SPECIFIC DUTIES							
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 Responsible for organization and direct management of station registry.						RATING LETTER S	
SPECIFIC DUTY NO. 2 First-line supervisor for two full-time and one part-time registry assistants.						RATING LETTER S	
SPECIFIC DUTY NO. 3 Organizes and implements review and purgo of registry and other station files.						RATING LETTER O	
SPECIFIC DUTY NO. 4 Prepares station notices and outgoing correspondence on registry matters.						RATING LETTER S	
SPECIFIC DUTY NO. 5 Maintains and controls case file index and 201 file index.						RATING LETTER S	
SPECIFIC DUTY NO. 6 Top Secret Control Officer.						RATING LETTER S	
OVERALL PERFORMANCE IN CURRENT POSITION						RATING LETTER	
Take into account everything about the employee which influences his effectiveness in his current position: his 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 3	



SECRET

SECTION C		NARRATIVE COMMENTS	
<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. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p>With about nineteen months experience managing the station registry already under his belt, his usefulness here increases. He continues to demonstrate the same quietly effective leadership and talent for sound organization in his own shop as were noted on the last fitness report.</p> <p>While maintaining a high standard in the more routine day-to-day services and processes a registry is normally expected to supply, he has also been the catalyst for a thorough, carefully phased and continuing review and, where appropriate, purge of registry and other file holdings. Administering this ambitious reduction program requires sound judgment and experience in handling the detail in our existing records. Subject has these qualities and has achieved impressive results. To complete this task, he has asked to extend his tour here for one year until November 1971 and Headquarters has approved this.</p> <p>He is invariably completely responsive to guidance from the DCOS, his immediate supervisor, and conscientiously seeks to achieve the work goals which are identified during our occasional accomplishment and performance consultations. The spirit of cooperation with which he deals with other station personnel is equally commendable.</p> <p>No criticism can be made of his security and cover department.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
18 June 1970	/s/ James S. Woods		
2. BY SUPERVISOR			
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	
18 June 1970	DCOS	/s/ David Whipple	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Concur entirely with this favorable assessment. Subject has been a dedicated and conscientious supervisor of his office. His achievements have been quite measurable and specific, as described in the above report. On the basis of his performance here, Subject should have excellent career prospects for further growth in his chosen field.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
22 June 1970	COS	/s/ Bronson Tweedy	

SECRET

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
					010032	
SECTION A GENERAL						
1. NAME (Last) (First) (Middle) WOODS, James S.			2. DATE OF BIRTH 20 Feb 23	3. SEX M	4. GRADE GS-10	5. SD D
6. OFFICIAL POSITION TITLE Records Admin Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/EUR/BCR	8. CURRENT STATION London		
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 type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE		
<input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 31 October 1969			12. REPORTING PERIOD (From - to) 18 November 1968-30 September 1969			
SECTION B PERFORMANCE EVALUATION						
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>						
SPECIFIC DUTIES						
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	
Responsible for organization and direct management of Station Registry.					S	
SPECIFIC DUTY NO. 2					RATING LETTER	
First-line supervisor for at first three, later two, full-time Registry personnel and one part-time Registry assistant.					S	
SPECIFIC DUTY NO. 3					RATING LETTER	
Provides informal training and guidance to some Station officers and secretaries on records procedures.					S	
SPECIFIC DUTY NO. 4					RATING LETTER	
Prepares Station Notices and outgoing correspondence on Registry matters.					P	
SPECIFIC DUTY NO. 5					RATING LETTER	
Maintains and controls case file index and 201 file index.					S	
SPECIFIC DUTY NO. 6					RATING LETTER	
Top Secret control officer.					S	
OVERALL PERFORMANCE IN CURRENT POSITION						
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.					RATING LETTER	
					S	

SECRET

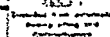
(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<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. Manner of performance of managerial or supervisory duties must be described, if applicable. He arrived ten months ago at this post, with considerable experience in Registry work at Headquarters and at other field stations and with a thorough understanding of how a Station Registry should be organized and run. He immediately put this understanding to good use. While maintaining the overall efficiency of Registry programs already in effect when he took over, he enthusiastically began a carefully-planned and continuing effort to further reduce less than essential Registry paper holdings with results which are already impressive. His suggestions on new procedures designed to conserve space and manpower are usually imaginative and practical.</p> <p>He himself is a remarkably well-organized, conscientious and cooperative person.</p> <p>He has had to undertake his improvements while accommodating to the loss of one Registry slot which fell victim to a Foreign Service reductions program. Primarily due to his managerial talents, the Registry has been made to carry on almost as well with three regulars as with the previous four. Although his people are increasingly hard-worked, their morale is high. He himself appears to be a glutton for work but his Registry is obviously a happy shop.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
9 October 1969	/s/ James S. Woods		
2. BY SUPERVISOR			
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	
9 October 1969		/s/ David D. Whipple	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
Concur with this very favorable assessment. Subject has a real talent for work in his chosen field and his professional accomplishments here have been impressive. Subject's career should be watched with care and there should be room for considerable advancement in the Records Management end of our business.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
5 November 1969		/s/ Bronson Tweedy	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				010032			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
Woods, James S.			20 Feb 28	M	GS-10	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Records Admin Of			DDP/FE/VNO		Vietnam		
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 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)			
				5 March 1968 - 5 October 1968			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak 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 counselling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>							
SPECIFIC DUTIES							
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			Chief Station Registry				RATING LETTER
			DC 52				O
SPECIFIC DUTY NO. 2			Management and training of personnel under his supervision				RATING LETTER
							S
SPECIFIC DUTY NO. 3			Scheduling of routine and exceptional work assigned to his unit.				RATING LETTER
							O
SPECIFIC DUTY NO. 4			Preparation of routine and other reports on the activities of his Section.				RATING LETTER
							S
SPECIFIC DUTY NO. 5			Overall Security of Registry operations				RATING LETTER
							S
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							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



SECRET

(When Filled In)

SECTION C	NARRATIVE COMMENTS
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. Mention of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.	
<p>This is Subject's final Fitness Report as Chief, Registry at Vietnam Station. He has worked long and hard but can look with pride at the many accomplishments that he has effected during his tenure. He will depart leaving a sound and well-functioning organization. His planning has been effective and his cross-training and development of the personnel under his supervision have been fully productive.</p> <p>During this period, his unit has experienced heavy increases in workload and assumed new or additional functions with no reduction in the service provided to Station components.</p> <p>Subject has been responsible for many work saving innovations, procedural changes and a thorough updating and revamping of the highly important registry reference records.</p> <p>The personnel under his supervision display enthusiasm and dedication in their work. Their pleasant manner is a reflection of Subject's management ability.</p> <p>Subject performs his managerial and supervisory duties in a highly professional manner. He knows systems, writes lucid and concise procedures and reacts positively to situations. He is a "Doer".</p>	

SECTION D CERTIFICATION AND COMMENTS		
1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
21 Sept 1968	/s/James S. Woods	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
14		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
21 Sept 1968	Records Admin Officer	/s/John K. Smith
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
<p>I concur in the ratings and comments of the Rating Officer.</p> <p>Subject has been most amenable and responsive to positive direction.</p>		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
21 Sept 1968	Ops Officer	/s/Vincent M. Lockhart

SECRET

SECRET

-2-

NARRATIVE COMMENTS, Section C. (Continued)

I have enjoyed serving with Subject, wish him success at his next post and look forward to serving with him again.

Subject is cost conscious.

SECRET

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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.

Subject has done an excellent job in organizing the layout and arranging the work flow in the new Station Registry. As a result, his unit has been operating on a fully effective and productive basis, even during the recent emergency when certain workloads increased several hundred per cent. In operation and physical appearance the Station Registry may be considered a model registry.

He is very cooperative and works well with other offices in solving mutual problems or setting up new requirements.

Subject is industrious and dedicated and willingly works long hours to meet the daily demands of his position. He performed in an exemplary manner while working for an extended period under stress during the recent emergency.

Subject is a pleasant, dependable individual who is anxious to do the best job possible in a demanding and vital position at the Station.

He is properly cost conscious in the use of personnel, space and equipment.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
Subject has not reviewed this report inasmuch as it recommends him for promotion.

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

5 March 1968

Records Admin Officer

/s/John K. Smith

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

5 March 1968

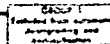
Ops Officer

/s/Vincent Lockhart

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				010032 ✓			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
Woods, James S.			20 Feb, '28	M	GS-9	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Records Admin Of			DDP/FE/VNO		Vietnam		
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 type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL	<input 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-)			
				10 May 1967 - 30 Sep, 1967			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>							
SPECIFIC DUTIES							
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	
Chief, Station Registry Section						P	
SPECIFIC DUTY NO. 2						RATING LETTER	
Management and training of personnel under his supervision						A	
SPECIFIC DUTY NO. 3						RATING LETTER	
Scheduling of routine and exceptional work assigned to his unit.						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Preparation of routine and other reports on the activities of his Section.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
Overall security of Registry operations.						A	
SPECIFIC DUTY NO. 6						RATING LETTER	
29 NOV 1967							
OVERALL PERFORMANCE IN CURRENT POSITION							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.							P



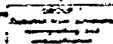
SECRET
(When Filled In)

SECTION C			NARRATIVE COMMENTS		
<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>Monetary performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable.</u> If extra space is needed to complete Section C, attach a separate sheet of paper.</p>					
<p>Subject is responsible for the supervision and operation of one of the more diversified and complex field registry operations in the Organization. He is thoroughly knowledgeable and experienced in registry practices. Subject is a dedicated and hard working officer who will apply himself diligently to individual registry activities. Such diligent application occasionally causes him to overlook his overall supervisory role, the supervision and management of eleven personnel and the responsibility for providing a wide variety of services, locally and in-country. In the press of his activities, he does not always employ a high degree of tact in dealing with his subordinates. In this context it should be noted that he is performing proficiently in a position well above his present grade level.</p>					
<p>During the past several months, the Section has undergone several changes and assumed additional functions under his guidance.</p>					
<p>Subject is cost conscious in the use of supplies and equipment in his Section.</p>					
<p>Subject is attending evening courses leading toward his degree to further himself professionally.</p>					
SECTION D			CERTIFICATION AND COMMENTS		
1. BY EMPLOYEE					
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT					
DATE	SIGNATURE OF EMPLOYEE				
14 Aug 1967	/s/James S. Woods				
2. BY SUPERVISOR					
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			
14 Oct 1967	Records Admin Officer	/s/John K. Salth			
3. BY REVIEWING OFFICIAL					
COMMENTS OF REVIEWING OFFICIAL					
<p>I concur in the ratings and comments of the supervisor. In fairness to the employee, it should be noted that the supervisor is a conscientious and conservative rater.</p>					
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE			
14 Oct 1967	Ops Officer	/s/Vincent M. Lockhart			

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						010032 ✓	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
Woods, James S.			20 Feb. 28	M	GS 9	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Records Admin Officer			DCS/FE/THO		VIETNAM		
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 checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> ANNUAL		<input 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)			
				14 Jan 67 - 9 May 67			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>							
SPECIFIC DUTIES							
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	
Chief, Registry with supervisory responsibility for 8 employees.						8	
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	
28 JUN 1967							
OVERALL PERFORMANCE IN CURRENT POSITION							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



SECRET

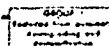
(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<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 and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable.</u> If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p style="text-align: right;">Jun 12 10 44 AM '67</p> <p>Although Subject has been at the Station for only a few months, he quickly established himself as a formidable leader in a very large Registry operation. He is resourceful and constantly strives to improve office procedures in order to increase efficiency and provide better service. He is an old hand in the Registry field, well indoctrinated in proper procedure and knows when and how to adjust to meet changing situations.</p> <p>Subject effectively supervises 8 employees and displays cost consciousness in the management and operation of his office.</p>			
SECTION D.		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
8 May 1967	/s/James S. Woods		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
4			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
8 May 1967	Records Officer	/s/Richard Richardson	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
Concur with rating and narrative comments. Subject is employing in this position his cumulative experience as a Registry supervisor at previous posts. Subject has contributed to the improvement of Registry procedures and in-country courier system of this large and fast moving station.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
15 May 1967	Ops Officer	/s/Terry T. Shias	

SECRET

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
					010032 ✓	
SECTION A GENERAL						
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
WOODS JAMES			20 Feb 28	M	GS-9	b
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Intel. Analyst - CH			DDP/FE/Perb/JKO		Tokyo	
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 checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input 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)			
			30 Sept 65 - 1 Sept 1966			
SECTION B PERFORMANCE EVALUATION						
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>						
SPECIFIC DUTIES						
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 Chief of Central Registry and Records with responsibility for the receipt and routing of all incoming and outgoing cables, dispatches, and memoranda of the Station, including all other organizations corresponding with the Station.						RATING LETTER O
SPECIFIC DUTY NO. 2 Supervises six Registry employees						RATING LETTER S
SPECIFIC DUTY NO. 3 Supervises Station courier service which distributes classified correspondence to the five geographically separated elements of the Station.						RATING LETTER S
SPECIFIC DUTY NO. 4 Supervises the analysts and distribution of incoming and outgoing cables.						RATING LETTER S
SPECIFIC DUTY NO. 5 Supervises the operation of the Station Flexowriters.						RATING LETTER S
SPECIFIC DUTY NO. 6						RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION						
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.						RATING LETTER S



SECRET

(When Filled In)

SECTION C			NARRATIVE COMMENTS			OFFICE OF THE REGISTER		
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective the 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.</p>								
<p>FOSHAG has continued to perform at a "Strong" level. He is a fine supervisor and thereby gets maximum performance from his staff which is too small to handle a work load which has constantly increased over the past year. He is cost conscious in funds material and also strives to stream-line and improve the functioning of the Registry and its related functions.</p> <p>FOSHAG has twice been recommended for promotion. He definitely deserves it and should be assigned next to a position above his present rating.</p>								
SECTION D								
CERTIFICATION AND COMMENTS								
1. BY EMPLOYEE								
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT								
DATE			SIGNATURE OF EMPLOYEE					
15 August 1966			James Woods /S/					
2. BY SUPERVISOR								
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION			IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION					
14								
DATE			OFFICIAL TITLE OF SUPERVISOR			TYPED OR PRINTED NAME AND SIGNATURE		
16 August 1966			OPS. Officer			Kenneth Miller /S/		
3. BY REVIEWING OFFICIAL								
COMMENTS OF REVIEWING OFFICIAL								
Concur in above rating.								
DATE			OFFICIAL TITLE OF REVIEWING OFFICIAL			TYPED OR PRINTED NAME AND SIGNATURE		
17 August 1966			Chief of Station			William E. Nelson /S/		

SECRET

SECRET

(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						010032	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
Woods, James S.			20 Feb 28	M	GS-09	D	
6. OFFICIAL POSITION/TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Intel Analyst Ch			DDP/FE/JKO		Tokyo		
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"/> CAREER-PROVISIONAL (See Instructions - Section C)		<input checked="" type="checkbox"/> ANNUAL				<input type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> SPECIAL (Specify):				<input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
NOV 30 1965				1 July - 30 September 1965			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>							
SPECIFIC DUTIES							
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 Chief of Central Registry and Records with responsibility for the receipt and routing of all incoming and outgoing cables, dispatches, and memoranda of the Station, including all other organizations corresponding with the Station.							RATING LETTER
							O
SPECIFIC DUTY NO. 2 Supervises six Registry employees							RATING LETTER
							S
SPECIFIC DUTY NO. 3 Supervises Station courier service which distributes classified correspondence to the five geographically separated elements of the Station.							RATING LETTER
							S
SPECIFIC DUTY NO. 4 Analyze and distribute all incoming and outgoing Station cables.							RATING LETTER
							O
SPECIFIC DUTY NO. 5 Supervise the operation of the Station Flexowriter.							RATING LETTER
							S
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							
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.							RATING LETTER
15 DEC 1965							S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position based on 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.

Woods

Dec 15 9 21 AM '65

During the four months ~~Woods~~ has been under my supervision he has demonstrated very real supervisory ability and a talent for getting maximum performance from a small staff which handles an increasingly large volume of work. He has also shown his ability to cut the costs of his operation.

~~Woods~~ not only runs a most efficient Registry but is also constantly seeking ways to improve and stream-line its operation. He is a man who takes such interest in his job that his ideas and plans for improvement are carefully worked out and sound.

Though I have observed his work for only four months, I believe his over-all performance is "Strong" and close to "Outstanding." He has been recommended for promotion. He deserves it.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE: 27 October 1965 SIGNATURE OF EMPLOYEE: /s/ James S. Woods

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 4 IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYER, GIVE EXPLANATION

DATE: 27 October 1965 OFFICIAL TITLE OF SUPERVISOR: Ops Officer TYPED OR PRINTED NAME AND SIGNATURE: /s/ Kenneth P. Miller

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I agree with his supervisor that Subject is unusually competent in his field and fully deserving of a "Strong" rating. Subject displays unflagging enthusiasm for his job and constantly tries to improve his operation. He has displayed a high degree of imagination and inventiveness in making changes in our over-all CRR set-up. He very definitely deserves promotion.

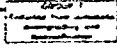
DATE: 2 November 1965 OFFICIAL TITLE OF REVIEWING OFFICIAL: DCOS TYPED OR PRINTED NAME AND SIGNATURE: /s/ Horace E. Feldman

SECRET

13771

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						010032	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. JO	
Woods, James S.			20 Feb 1923	M	GS-09	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Intel Analyst Gen			DDP/PE		Tokyo		
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 checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input type="checkbox"/> ANNUAL <input 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)			
				1 October 1964 - 30 June 1965			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>							
SPECIFIC DUTIES							
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	
Chief of Central Registry and Records with responsibility for the receipt and routing of all incoming and outgoing cables, dispatches, and memoranda of the Station, including all other organizations corresponding with the Station						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Supervises six Registry employees						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
Supervises Station courier service which distributes classified correspondence to the five geographically separated elements of the Station						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Analyzes and distributes all incoming and outgoing Station cables						O	
SPECIFIC DUTY NO. 5						RATING LETTER	
Supervises the Station Flexewriter						S	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
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.						RATING LETTER	
29 JUN 1965						S	



SECTION C NARRATIVE COMMENTS

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 ~~the~~ ~~work~~ ~~being~~. 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.

As Chief of the Station Registry this employee continues to perform ^{90%} ~~an~~ exceptional level with little supervision from his supervisor. His supervisor ^{has} ~~is~~ being reassigned and is scheduled to be replaced by another officer who ^{will} ~~is~~ necessarily need several months to become knowledgeable of Registry activities. ^{However} ~~There~~ there is no concern that the flow of paper and the maintenance of accurate records will be affected due to the turnover of supervisors. This employee continues to use his native ingenuity and high standards of achievement to ensure that his office continues to be a well run and efficient unit. He continues to ensure that no government funds are wasted, even to the extent of arranging for the construction of certain modifications to the Registry office by Registry employees at little cost to the Government. This employee has been performing at a level above his present GS-09 grade. As recommended in November 1964, it is reconfirmed that this employee should be promoted to the next higher grade at the earliest possible opportunity.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE: 4 June 65
SIGNATURE OF EMPLOYEE: /s/ James S. Woods

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 45
IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE: 4 June 65
OFFICIAL TITLE OF SUPERVISOR: Cap Officer
TYPED OR PRINTED NAME AND SIGNATURE: /s/ Frederick Randall

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Subject takes his job seriously and performs it in strong fashion. I would say that he displays more energy, interest, and continuing attention than just about anyone else I've seen in registry-type work.

DATE: 10 June 65
OFFICIAL TITLE OF REVIEWING OFFICIAL: DCS
TYPED OR PRINTED NAME AND SIGNATURE: /s/ Horace Z. Feldman

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A				GENERAL			
1. NAME <small>(Last) (First) (Middle)</small> Woods, James S.			2. DATE OF BIRTH 20 Feb 23	3. SEX M	4. GRADE GS-09	5. SD D	
6. OFFICIAL POSITION TITLE Intel Analyst Gen			7. OFF/DIV. BR OF ASSIGNMENT DDP/FE/JKO		8. CURRENT STATION Tokyo		
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 checked="" type="checkbox"/> INITIAL		REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify)			<input checked="" type="checkbox"/> ANNUAL		REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P. 30 Nov 64			12. REPORTING PERIOD (From - to) 1 October 1963 - 30 September 1964				
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>							
SPECIFIC DUTIES							
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 Chief of Central Registry and Records with responsibility for the receipt and routing of all incoming and outgoing cables, dispatches, and memoranda of the Station, including all other organizations corresponding with the Station						RATING LETTER S	
SPECIFIC DUTY NO. 2 Supervises six Registry employees						RATING LETTER S	
SPECIFIC DUTY NO. 3 Supervises Station courier service which distributes classified correspondence to the five geographically separated elements of the Station						RATING LETTER S	
SPECIFIC DUTY NO. 4 Analyzes and distributes all incoming and outgoing Station cables						RATING LETTER S	
SPECIFIC DUTY NO. 5 Supervises the Station Flexewriter						RATING LETTER S	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
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.						RATING LETTER S	

SECRET

(When filled in)

SECTION C NARRATIVE COMMENTS

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, if applicable.

This employee continues to be Chief of the Station Registry. During the past year his level of performance can be properly evaluated as exceptionally proficient. He continues to welcome hard work, is not bothered by constantly changing deadlines and is able to fill in for any absent member of his unit, and keep up his own work as well. He is quite conscious of the value of Government personnel and materiel, and does everything in his power to conserve these resources. He continues to come up with new ideas on how to perform his functions in a more efficient and effective manner. This results in benefits to the entire Station. It is regrettable that the position this employee fills does not allow for promotion since he has been performing at a level above his present grade for several years.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
1 Oct 64	/s/ James S. Woods

2. BY SUPERVISOR

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
1 Oct 64	Ops Officer	/s/ Frederick Randall

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I fully concur with the rater's comments and sentiments. I have known this employee for a number of years during which time he has evidenced real growth in self-sufficiency and also in the handling of his responsibilities as a supervisor.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
29 Oct 64	COS	/s/ William V. Broe

SECRET

CONFIDENTIAL
SECRET
(When Filled in)

ATT TO FJTT-10860

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
					10032	
SECTION A GENERAL						
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
Woods, James S.			20 Feb 28	M	GS-09	D
6. OFFICIAL POSITION TITLE			7. OFF. DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Intel Analyst Gen			DDP/FE/JKO		Tokyo	
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"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)			
30 November 1963			1 Oct 62-30 Sep 63			
SECTION B PERFORMANCE EVALUATION						
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>						
SPECIFIC DUTIES						
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	
Chief of Central Registry and Records with responsibility for the receipt and routing of all incoming and outgoing cables, dispatches, and memoranda of the Station, including all other organizations corresponding with the Station.					S	
SPECIFIC DUTY NO. 2					RATING LETTER	
Supervises six Registry employees					P	
SPECIFIC DUTY NO. 3					RATING LETTER	
Supervises Station courier service which distributes classified correspondence to the five geographically separated elements of the Station.					P	
SPECIFIC DUTY NO. 4					RATING LETTER	
Analyzes and distributes all incoming and outgoing Station cables.					P	
SPECIFIC DUTY NO. 5					RATING LETTER	
SPECIFIC DUTY NO. 6					RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION						
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.					RATING LETTER	
S					S	

CONFIDENTIAL
SECRET

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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.

As Chief of the Tokyo Station Registry, this employee has performed at a level of exceptional proficiency for the past year. He welcomes hard work, is able to fill in for any absent member of his unit and keep up his own work as well. He continues to bring up ideas for the improvement of his unit. These have been particularly welcome during the past year in view of the impending move of the Registry to a new location at Fuchu Air Station. The slight tendency to be arbitrary mentioned in the last fitness report has been eliminated during this reporting period. In view of this employee's strong performance over the past year, he is being recommended for promotion to GS-10.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

10 Sept. 63

/s/ James S. Woods

2.

BY SUPERVISOR

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

10 Sept. 63

Chief, Ops Support Staff

/s/ Frederick Randall

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur in this rating and add that this employee has not let the very serious personal problems thrust upon him during this period interfere in any way with his consistently dependable performance. In this key role, in any station of this size, dependability, reliability, and confidence are "musts" and while there are quite naturally small aggravating incidents of mis-routing or mis-direction of documents, I have been struck by the lack of them here, because ratee has the "must" qualities. His performance certainly warrants favorable consideration of the projected promotion action.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

11 September 63

Deputy Chief of Station

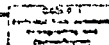
Robert Wheeler *RW*

SECRET

SECRET

(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
WOODS, James S.			20 Feb 28	M	GS-9	D	
6. OFFICIAL POSITION TITLE			7. OFF/OIV/BR OF ASSIGNMENT	8. CURRENT STATION			
Intel Analyst			DDP/FE	TOKYO			
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 type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL	<input 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)				
			1 Oct 61 - 30 Sept 62				
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>							
SPECIFIC DUTIES							
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	
Chief of Central Registry and Records with responsibility for the receipt, analysis and routing of all incoming and outgoing cables, dispatches and memoranda of the Station, including all other organizations corresponding with the Station.						P	
SPECIFIC DUTY NO. 2						RATING LETTER	
Supervises four Registry employees.						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
Supervises a courier service which distributes correspondence to the five geographically separated elements of the Station.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
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.						RATING LETTER	
						P	



SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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.

As the Chief of the Tokyo Registry this employee has performed well. He has abundant energy and constantly comes up with ideas for the improvement of the efficiency of his unit. He welcomes hard work and is able to fill in and take over any job in his unit and keep up with his own duties as well. As a supervisor, he has a slight tendency to be arbitrary when convinced he is right. This may be due to the fact that the Registry frequently operates under conditions of pressure due to the recent reorganization, reduction, and relocation of the Station. The Station has been required to get the job done with fewer people and under more difficult working conditions.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

25 Oct. 1962

SIGNATURE OF EMPLOYEE

James S. Woods /s/

2.

BY SUPERVISOR

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

Frederick Randall

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Subject has done and continues to do well what is expected of him. In amplification of the last sentence of the rater's comments (Section C) Subject has made the adjustment to "fewer people" and "more difficult working conditions" quite well, without trouble and more importantly with no impediment to the CRR service.

DATE

26 Oct 1962

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

Robert P. Wheeler

SECRET

SECRET
(When Filled In)

FITNESS REPORT	EMPLOYEE SERIAL NUMBER CSPD
-----------------------	---------------------------------------

SECTION A GENERAL			
1. NAME (Last) (First) (Middle) Woods, James	2. DATE OF BIRTH 20 Feb 28	3. SEX M	4. GRADE GS-9
5. SERVICE DESIGNATION D		6. OFFICIAL POSITION TITLE Ops Officer	
7. OFF/DIV/BR OF ASSIGNMENT TOKYO STATION		8. CAREER STAFF STATUS	
<input type="checkbox"/> NOT ELIGIBLE	<input type="checkbox"/> MEMBER	<input type="checkbox"/> DEFERRED	<input type="checkbox"/> INITIAL
<input type="checkbox"/> PENDING	<input type="checkbox"/> DECLINED	<input type="checkbox"/> DENIED	<input checked="" type="checkbox"/> ANNUAL
9. TYPE OF REPORT <input type="checkbox"/> REASSIGNMENT/SUPERVISOR		<input type="checkbox"/> REASSIGNMENT/EMPLOYEE	
10. DATE REPORT DUE IN O.F.		11. REPORTING PERIOD From 15 Apr 61 To 30 Sep 61	

SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES			
List up to six of the most important specific duties performed during the rating period. Insert rating number 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).			
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent
5 - Excellent	6 - Superior	7 - Outstanding	
SPECIFIC DUTY NO. 1 Chief of local registry, supervising four persons.	RATING NO. 4	SPECIFIC DUTY NO. 4	RATING NO.
SPECIFIC DUTY NO. 2	RATING NO.	SPECIFIC DUTY NO. 5	RATING NO.
SPECIFIC DUTY NO. 3	RATING NO.	SPECIFIC DUTY NO. 6	RATING NO.

SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION			
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.			
<ul style="list-style-type: none"> 1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding. 	<table border="1" style="width: 50px; height: 50px; margin: auto;"> <tr><td>RATING NO.</td></tr> <tr><td align="center">4</td></tr> </table>	RATING NO.	4
RATING NO.			
4			

SECTION D DESCRIPTION OF THE EMPLOYEE					
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee					
1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree	
CHARACTERISTICS			NOT APPLICABLE	NOT OBSERVED	RATING
			1	2	3
			4	5	
GETS THINGS DONE					
RESOURCEFUL					
ACCEPTS RESPONSIBILITIES					
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES					
DOES HIS JOB WITHOUT STRONG SUPPORT					
FACILITATES SMOOTH OPERATION OF HIS OFFICE			X		
WRITES EFFECTIVELY				X	
SECURITY CONSCIOUS					
THINKS CLEARLY					X
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS					X
OTHER (Specify):					

SEE SECTION "E" ON REVERSE SIDE

SECRET
(When Filled In)

OFFICE OF PERSONNEL

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for developing and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide basis for determining future personnel actions.

Hatce has been in charge of station registry since 28 April 61. This has been a period of dramatic change in the station and especially in our paper management. He has responded well to these changes and shows a degree of adaptability that bodes well. His handling of our recent "holdings" inventory, his unceasing efforts to reduce unnecessary holdings, and his knowledge of his business (RI) have made him a valued addition to our shrinking team. In this short rating period there has been little opportunity for me to observe his supervisory abilities, but the lack of any problem on this count coming to my attention means to me that he is doing well. Another six months should tell us more on this score.

SECTION F CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE SIGNATURE OF EMPLOYEE

6 Oct 61

[Signature]

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS

REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

6 Oct 61

Ops Officer

Wheeler, Robert P.

3. BY REVIEWING OFFICIAL

I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.

I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.

I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.

I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

6 Oct 61

Ops Officer

Wheeler, Robert P.

SECRET

SECRET
(When Filled In)

20 DEC 1960

2 (Last) FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A GENERAL				110032			
1. NAME (Last) WOOBS (First) James (Middle) S.		2. DATE OF BIRTH 20 February 1928		3. SEX M		4. GRADE GS-9	
5. SERVICE DESIGNATION DI		6. OFFICIAL POSITION TITLE Records Management Officer		7. OFF/DIV/BR OF ASSIGNMENT DDP/12/Secretariat			
8. CAREER STAFF STATUS				9. TYPE OF REPORT			
NOT ELIGIBLE <input checked="" type="checkbox"/>		MEMBER <input type="checkbox"/>		DEFERRED <input type="checkbox"/>		INITIAL <input type="checkbox"/>	
PENDING <input type="checkbox"/>		DECLINED <input type="checkbox"/>		DENIED <input type="checkbox"/>		X ANNUAL <input checked="" type="checkbox"/>	
REASSIGNMENT/SUPERVISOR		REASSIGNMENT/EMPLOYEE					
10. DATE REPORT DUE IN O.P. 31 October 1960		11. REPORTING PERIOD From Sep 57 - 30 Sep 60 To		SPECIAL (Specify)			
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating number 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).							
1 - Unsatisfactory		2 - Barely adequate		3 - Acceptable		4 - Competent	
5 - Excellent		6 - Superior		7 - Outstanding			
SPECIFIC DUTY NO. 1 Liaison with RID, DDP/RMO, DDP/MCU, other Division records officers, etc., re implementation of DDP records management program		RATING NO. 6		SPECIFIC DUTY NO. 4 Assistance to FE personnel in problems of retention and retirement of records		RATING NO. 6	
SPECIFIC DUTY NO. 2 Training and assistance to FE personnel in records management procedures		RATING NO. 5		SPECIFIC DUTY NO. 5 Guidance to field records officers		RATING NO. 5	
SPECIFIC DUTY NO. 3 Planning and development of Division vital materials program		RATING NO. 5		SPECIFIC DUTY NO. 6 Implementation of various records purges and records programs		RATING NO. 5	
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.							
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.						RATING NO. 5	
SECTION D DESCRIPTION OF THE EMPLOYEE							
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee							
1 - Least possible degree		2 - Limited degree		3 - Normal degree		4 - Above average degree	
						5 - Outstanding degree	
CHARACTERISTICS				NOT APPLICABLE	NOT DERIVED	RATING	
						1	2
GETS THINGS DONE							
RESOURCEFUL							
ACCEPTS RESPONSIBILITIES							
CAN MAKE DECISIONS ON HIS OWN WHEN NEEDED ARISES							
DOES HIS JOB WITHOUT STRONG SUPPORT							
FACILITATES SMOOTH OPERATION OF HIS OFFICE							
WRITES EFFECTIVELY							
SECURITY CONSCIOUS							
THINKS CLEARLY							
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS							
OTHER (Specify):							
SEE SECTION "B" ON REVERSE SIDE							

SECRET

(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and his ability to assume greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Subject is an excellent records officer. His interest in the subject and his perseverance in carrying out tasks connected with it have not only produced results in his own work, but have kindled enthusiasm and interest within the Division in developments in Agency records management. He has been able to improve records within the Division with a great deal of success, and at the same time avoided the usual aversion to records responsibility which too much emphasis on records creates in the case officer. His ability to get along well with others is important in his liaison function.

Mr. Woods' work on the vital materials program in the last year has resulted in a much more realistic program for the Division. The creation and ~~establishment~~ up-to-date retention of vital materials has for some time been a problem for which little solution could be found. It appears that the present program will result in vital materials which will be current and usable if needed.

Subject is at present assigned to a part-time detail in MMU. This should help to broaden his knowledge of new approaches in the records field. A/EXO/DDP has expressed his complete satisfaction with the very effective work Mr. Woods is doing on this detail.

Mr. Woods' work during the last year was the basis for a commendation of the Division's records program by CDF.

SECTION F CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I certify that I have seen Sections A, B, C, D and E of this Report.		
DATE 16 DEC 1960	SIGNATURE OF EMPLOYEE <i>James J. Woods</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 20	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.		
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS	REPORT MADE WITHIN LAST 90 DAYS	
OTHER (Specify):		
DATE 16 December 1960	OFFICIAL TITLE OF SUPERVISOR C/FE/ESEC	TYPED OR PRINTED NAME AND SIGNATURE <i>Harriet L. Weller</i> Harriet L. Weller
3. BY REVIEWING OFFICIAL		
<input checked="" type="checkbox"/> I COULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.		
<input type="checkbox"/> I COULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION:		
<input type="checkbox"/> I COULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.		
<input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL FE/EXO	TYPED OR PRINTED NAME AND SIGNATURE <i>Orrin R. Magill, Jr.</i> Orrin R. Magill, Jr.

SECRET
(When Filled In)

Records
6020

1 FEB 1960

FITNESS REPORT		EMPLOYEE SERIAL NUMBER 110032
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SECTION A GENERAL					
1. NAME (Last) (First) (Middle) Woods, James J.			2. DATE OF BIRTH 20 February 1928		3. SEX M
4. GRADE AS-9		5. SERVICE DESIGNATION DI		6. OFFICIAL POSITION TITLE Records Mgmt Officer	
7. OFF/DIV/DR OF ASSIGNMENT ADP/FE/5 Southern			8. CAREER STAFF STATUS MEMBER		
9. TYPE OF REPORT INITIAL			REASSIGNMENT/SUPERVISOR		
10. DATE REPORT DUE IN O.P. 31 October 1959			11. REPORTING PERIOD From 58-30 Sep 59 To		
PENDING			DECLINED		
DENIED			ANNUAL		
REASSIGNMENT/EMPLOYEE			SPECIAL (Specify)		

SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES						
List up to six of the most important specific duties performed during the rating period. Insert rating number 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).						
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding
SPECIFIC DUTY NO. 1 Liaison with RID, DDP/RMO, DDP/MMU, other Division records officers, etc, re implementation of records mgt program		RATING NO. 6	SPECIFIC DUTY NO. 4 Assistance to FE personnel in problems of retention and retirement of records		RATING NO. 5	
SPECIFIC DUTY NO. 2 Training and assistance for FE personnel in records mgt procedures		RATING NO. 4	SPECIFIC DUTY NO. 5 Guidance to field records officers		RATING NO. 6	
SPECIFIC DUTY NO. 3 Planning and development of Division vital materials program		RATING NO. 4	SPECIFIC DUTY NO. 6 Guidance in all records problems		RATING NO. 5	

SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION	
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.	
<ul style="list-style-type: none"> 1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding. 	RATING NO. 5

SECTION D DESCRIPTION OF THE EMPLOYEE											
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee											
1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree							
CHARACTERISTICS			NOT APPLICABLE	NOT SERVED	RATING						
					1	2	3	4	5		
GETS THINGS DONE											X
RESOURCEFUL											X
ACCEPTS RESPONSIBILITIES											X
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES										X	
DOES HIS JOB WITHOUT STRONG SUPPORT										X	
FACILITATES SMOOTH OPERATION OF HIS OFFICE									X		
WRITES EFFECTIVELY							X				
SECURITY CONSCIOUS											X
THINKS CLEARLY									X		
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS									X		
OTHER (Specify):											X
SEE SECTION "E" ON REVERSE SIDE											

SECRET
(When Filled In)

OFFICE OF PERSONNEL

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the basis for determining future personnel actions.

Subject is an excellent records officer. He is enthusiastic about his specialty and works hard at it, putting a great deal of energy into his work.

He is quick and understands records thoroughly. Because of this, he is at times inclined to jump ahead of others in records discussions and should attempt to slow down his approach to the subject to meet the level of persons who do not have the same records background.

Subject could fill any position in the records management field, and should advance quickly. He is interested in developing his capabilities and is at present enrolled in the Writing Workshop with this in mind.

This report has been prepared in accordance with FE Division standards which recognize the value of placing the individual against the group. Thus an "average" rating reflects an entirely satisfactory performance.

SECTION F CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE 29 Oct 59 SIGNATURE OF EMPLOYEE James S. Hoods

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 7 IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS REPORT MADE WITHIN LAST 90 DAYS OTHER (Specify):

DATE 27 October 1959 OFFICIAL TITLE OF SUPERVISOR C/FE/ESEC TYPED OR PRINTED NAME AND SIGNATURE Harriet Weller

3. BY REVIEWING OFFICIAL

- X I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.
I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.
I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.
I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL Subject is a promising young records officer. He has demonstrated a capability for growth and for assuming greater responsibility. He is very much interested in records management and wants to make a career of it. His career development should be designed to afford him opportunities for maximum development both in terms of varied Headquarters experience and in field assignments.

DATE OFFICIAL TITLE OF REVIEWING OFFICIAL TYPED OR PRINTED NAME AND SIGNATURE FE/EXO Orrin E. Magill, Jr.

SECRET

SECRET

(When Filled In)

FF-25

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item B, of Section "A" below.

SECTION A. GENERAL

1. NAME (Last) Woods, (First) James, (Middle) W. 2. DATE OF BIRTH 20 Feb. 1938 3. SEX M 4. SERVICE DESIGNATION DT. 5. OFFICE DIVISION BRANCH OF ASSIGNMENT DDP/ SA FE/PSR/Manila 6. OFFICIAL POSITION TITLE Asst. 7. GRADE GS-7 8. DATE REPORT DUE IN DP 21 August 1958 - 4 Sept. 1958 9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 21 August 1958 - 4 September 1958 10. TYPE OF REPORT (Check one) INITIAL [] ANNUAL [] REASSIGNMENT-SUPERVISOR [] SPECIAL (Specify) [] REASSIGNMENT-EMPLOYEE [] For TDY Period--MRLR [X]

SECTION B. CERTIFICATION

1. FOR THE RATER: THIS REPORT [] HAS [X] NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT: Subject left station

A. CHECK (X) APPROPRIATE STATEMENTS:

X THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL. IF INDIVIDUAL IS RATED "C" OR "D", A WARNING LETTER HAS BEEN SENT TO HIM & A COPY ATTACHED TO THIS REPORT. THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS. I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify): I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS HOW HE STANDS.

B. THIS DATE 18 Sept 1958 C. SUPERVISOR'S NAME Collin G. Harris D. SUPERVISOR'S OFFICIAL TITLE Chief of Station, Melb

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY [Signature] DATE 13 NOV 1958

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE B. TYPE OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL C. OFFICIAL TITLE OF REVIEWING OFFICIAL

SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DEFINITIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

- 1 - DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT. 2 - RARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES. 3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY REVEALS SOME AREA OF WEAKNESS. 4 - PERFORMS DUTIES IN A COMPLETE, EFFECTIVE MANNER. 5 - A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL. 6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS: This rating covers the period 21 August - 4 September 1958, while subject was in Melbourne surveying Station files and installing new RI standardized filing system.

SECRET

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES		OFFICE OF PERSONNEL																									
<p>DIRECTIONS:</p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during this period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as a supervisor who supervises a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same or a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">ORAL BRIEFING</td> <td style="width:33%;">HAS AND USES AREA KNOWLEDGE</td> <td style="width:33%;">CONDUCTS INTERVIEWS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPIING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERVIEWS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPIING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERVIEWS																									
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES																									
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN																									
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES																									
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS																									
TYPIING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK																									
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING																									
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA																									
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">1. INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</td> <td style="width:33%;">6. PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</td> </tr> <tr> <td>2. BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</td> <td>7. EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</td> </tr> <tr> <td>3. PERFORMS THIS DUTY ACCEPTABLY</td> <td></td> </tr> <tr> <td>4. PERFORMS THIS DUTY IN A COMPETENT MANNER</td> <td></td> </tr> <tr> <td>5. PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</td> <td></td> </tr> </table>				1. INCOMPETENT IN THE PERFORMANCE OF THIS DUTY	6. PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS	2. BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY	7. EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY	3. PERFORMS THIS DUTY ACCEPTABLY		4. PERFORMS THIS DUTY IN A COMPETENT MANNER		5. PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB															
1. INCOMPETENT IN THE PERFORMANCE OF THIS DUTY	6. PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS																										
2. BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY	7. EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY																										
3. PERFORMS THIS DUTY ACCEPTABLY																											
4. PERFORMS THIS DUTY IN A COMPETENT MANNER																											
5. PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB																											
DESCRIPTIVE RATING NUMBER	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER																								
Installing new RI Filing System	5	Develops new Programs	5																								
Surveying Station Files	5	Manages Files	5																								
Oral Briefing	5																										
<p>3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE</p> <p>DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job</p> <p>STRENGTHS: Ability to see another's viewpoint and to work out satisfactory compromises between the RI system and operational requirements of the Melbourne Station.</p> <p>WEAKNESSES: None observed.</p>																											
SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION																											
<p>DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the past, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <p>1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</p> <p>2. OF DOUBTFUL SUITABILITY - SHOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</p> <p>3. A BARELY ACCEPTABLE EMPLOYEE...BETTER AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</p> <p>4. OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</p> <p>5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</p> <p>6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</p> <p>7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</p>																											
<table border="1" style="width:50px; height:50px; margin: auto;"> <tr> <td align="center" style="font-size: 2em;">5</td> </tr> <tr> <td align="center">RATING NUMBER</td> </tr> </table>				5	RATING NUMBER																						
5																											
RATING NUMBER																											
<p>IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YES EXPLAIN FULLY:</p>																											

SECRET

(When Filled In)

25

PWA

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8. of Section "A" below.

SECTION A. GENERAL

1. NAME (Last) (First) (Middle) SOCKEK WOODS James S.	2. DATE OF BIRTH 20 Feb. 1928	3. SEX M	4. SERVICE DESIGNATION DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT Manila		6. OFFICIAL POSITION/TITLE Records Management Analyst	
7. GRADE GS-7	8. DATE REPORT DUE IN OP 8 December 1957 - September 1958	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	Promotion

SECTION B. CERTIFICATION

1. FOR THE RATER, THIS REPORT WAS HAD NOT BEEN SHOWN TO THE INDIVIDUAL NAMED. IF NOT SHOWN, EXPLAIN WHY NOT.
Absent from Station. Will be shown upon return.

A. CHECK (X) APPROPRIATE STATEMENTS:

<input type="checkbox"/>	THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	<input type="checkbox"/>	IF INDIVIDUAL IS RATED "I" IN CI OR D, A WARNING LETTER HAS BEEN SENT TO HIM AS A COPY ATTACHED TO THIS REPORT.
<input checked="" type="checkbox"/>	THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS SEE ATTACHED REPORTS	<input type="checkbox"/>	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input type="checkbox"/>	I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	<input checked="" type="checkbox"/>	Will upon return to Station.

B. THIS DATE 4 Sept 1958	C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR Ray F. Drummond	D. SUPERVISOR'S OFFICIAL TITLE C/Admin
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2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A DIFFERENT UNDERSTANDING OF THIS REPORT.

BY _____ DATE _____
H.B. [Signature]
10/2/58
 CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE 4 Sept 1958	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL OFFICIAL George E. Aurell	C. OFFICIAL TITLE OF REVIEWING OFFICIAL COG
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SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

- | | |
|----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| 5
INSERT RATING NUMBER | 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPLETE. |
| | 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES. |
| | 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY REVEALS SOME AREA OF WEAKNESS. |
| | 4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER. |
| | 5. A FINE PERFORMANCE; HANDLES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL. |
| | 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR. |

COMMENTS

SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES																											
<p>DIRECTIONS:</p> <p>a. State in the spaces below up to six of the most important SPECIFIC duties performed by this rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of THIS specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table style="width:100%; font-size: small;"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERROGATIONS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DERRICKING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DERRICKING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS																									
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TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING																									
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA																									
<p>OFFICE OF PERSONNEL OCT 14 9 17 AM '58 MAIL ROOM</p>																											
<p>DESCRIPTIVE RATING NUMBER</p>	<p>1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</p> <p>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</p> <p>3 - PERFORMS THIS DUTY ACCEPTABLY</p> <p>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER</p> <p>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</p>	<p>6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</p> <p>7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</p>																									
SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER																								
Supervises 2 Records Mgm. Analysts	5	Processes files in accordance with Specific Records System	6																								
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER																								
Devises Records Systems to suit Station needs.	6																										
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER																								
Trains Station personnel in Records maintenance.	5																										
3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE																											
<p>DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>Strengths: Works hard and fast. Able to analyze problems and organize work of Records Management Team in methodical sequence.</p> <p>Weakness: No notable weaknesses.</p>																											
SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION																											
<p>DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <p>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</p> <p>2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</p> <p>3 - A BARELY ACCEPTABLE EMPLOYEE...BELOWS AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</p> <p>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</p> <p>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</p> <p>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</p> <p>7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</p>																											
RATING NUMBER																											
6																											
<p>IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If YES, EXPLAIN FULLY)</p>																											

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CO no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E. GENERAL

1. NAME (Last) WOODS	(First) James	(Middle) B.	2. DATE OF BIRTH 20 Feb, 1928	3. SEX M	4. SERVICE DESIGNATION DE
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT Manila			6. OFFICIAL POSITION TITLE Records Management Analyst		
7. GRADE GS-7	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (inclusive dates) 8 December 1957 - September 1958			
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify) Promotion		
	ANNUAL	REASSIGNMENT-EMPLOYEE			

SECTION F. CERTIFICATION

1. FOR THE RATED: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED

A. THIS DATE 14 Sept. 1958	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR Ray F. Drummond	C. SUPERVISOR'S OFFICIAL TITLE C/Asst
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2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.

A. THIS DATE 14 Sept. 1958	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL George E. Aurell	C. OFFICIAL TITLE OF REVIEWING OFFICIAL COB
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SECTION G. ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

<p>6</p> <p>RATING NUMBER</p>	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
	7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? Yes No If your answer is YES, indicate below your opinion as to the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION		
3		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) WHOM CONTACT WITH IMMEDIATE SUBORDINATES IS FREQUENT (First line supervisors)		
	3	A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB. (Second line supervisors)		
	0	A GROUP, WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)		
	2	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT		
3		WHEN IMMEDIATE SUPERVISOR'S ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION		
	3	WHEN IMMEDIATE SUPERVISOR'S ACTIVITIES INCLUDE MEMBERS OF THE OPPOSITE SEX		
		OTHER (Specify)		

SECRET

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATEE EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION
6 months

4. COMMENTS CONCERNING POTENTIAL

OFFICE OF PERSONNEL
 OCT 14 9 17 AM '58
 MAIL ROOM

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

None planned nor available while on current overseas tour.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

Subject single and willing serve geographic locations. Believe subject performs best in demanding assignments.

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

- X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
- CATEGORY NUMBER
- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
 - 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
 - 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
 - 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
 - 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
3	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	5	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
3	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITIES	5	23. IS THOUGHTFUL OF OTHERS
4	4. IS ANALYTIC IN HIS THINKING	3	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
5	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGEMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	3	26. IS SECURITY CONSCIOUS
5	7. CAN GET ALONG WITH PEOPLE	5	17. COMES UP WITH SOLUTIONS TO PROBLEMS	3	27. IS VEXATILE
4	8. HAS MEMORY FOR FACES	3	18. IS OBEYANT	3	28. HIS CRITICISM IS CONSTRUCTIVE
4	9. GETS THINGS DONE	3	19. THINKS CAREFULLY	4	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
X	10. CAN Cope WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN AVAILABLE TIME LIMITS	5	30. DOES NOT REGULATE STRESS AND CONTINUOUS SUPERVISION

SECRET

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.
FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-37c. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section A below.

SECTION A. GENERAL			
1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
WOODS James B.			
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
		4 April - 30 June 1958	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	T.D.Y.

SECTION B. CERTIFICATION	
11. FOR THE RATED: THIS REPORT <input type="checkbox"/> WAS <input checked="" type="checkbox"/> HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.	
Report prepared after subject departed this station	

A. CHECK (X) APPROPRIATE STATEMENTS:	
<input type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "C" OR "D", A WARNING LETTER HAS BEEN SENT TO HIM OR A COPY ATTACHED TO THIS REPORT.
<input checked="" type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND OTHER SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS OWN PERFORMANCE BECAUSE (Specify):
other	
I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

B. THIS DATE	C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	D. SUPERVISOR'S OFFICIAL TITLE
10 July 1958	Orrin R. Merrill, Jr.	

12. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY DATE
 [Signature] 11 OCT 1958
 [Signature] 10/20/58

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
	Nicholas A. Hatzios	

SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES
 DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section B.

- 1 - DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
- 2 - BEARLY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
- 3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY BEVEALS SOME AREA OF WEARNESS.
- 4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
- 5 - A VERY GOOD PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- 6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

6
 INSERT RATING NUMBER
 COMMENTS:

SECRET

(When Filled In)

OFFICE OF PERSONNEL

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS: State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.

- a. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.
- c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisor on those who supervise a secretary only).
- d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- f. Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA

g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

- 1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY
- 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY
- 3 - PERFORMS THIS DUTY ACCEPTABLY
- 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER
- 5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB
- 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS
- 7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY

DESCRIPTIVE RATING NUMBER	RATING NUMBER	DESCRIPTIVE RATING NUMBER	RATING NUMBER
SPECIFIC DUTY NO. 1 Analysis of records problems and establishing records procedures	6	SPECIFIC DUTY NO. 4	RATING NUMBER
SPECIFIC DUTY NO. 2 Supervising	6	SPECIFIC DUTY NO. 5	RATING NUMBER
SPECIFIC DUTY NO. 3 Keeping his own records and reporting on work progress	5	SPECIFIC DUTY NO. 6	RATING NUMBER

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.

Subject analyzed difficult records problems quickly and precisely, discussed his recommendations forcefully and convincingly, and then proceeded to put them into effect with considerable energy. He not only supervised his subordinates effectively so that every minute was productive, but did a good share of the routine work himself, making certain that everything was done precisely as planned.

SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.

- 1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED
- 2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW
- 3 - A BARELY ACCEPTABLE EMPLOYEE...BETTER AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION
- 4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION
- 5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS
- 6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION
- 7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? YES NO IF YES, EXPLAIN FULLY.

SECRET

SECRET

(When Filled In)

29 SEP 1958

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the OI no later than 30 days after the due date indicated in Item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last):	(First)	(Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
WOODS	James	S.			
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT			6. OFFICIAL POSITION TITLE		
7. GRADE	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)			
		4 April - 30 June 1958			
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT SUPERVISOR	SPECIAL (Specify)		
	ANNUAL	REASSIGNMENT EMPLOYEE	T.D.Y.		

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
10 July 1958	James Orrin R. Magill, Jr.	
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
10 July 1958	Nicholas A. Natsios	

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

INSTRUCTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

6	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
	7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

INSTRUCTIONS: Answer this question: Has this person the ability to be a supervisor? Yes No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	
1	BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	
2	BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	
3	BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION	
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
3		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) - WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS FREQUENT (First line supervisor)
	3	A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)
	0	A GROUP, WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)
	3	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
	3	WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION
	0	WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX
	0	Other (Specify)

SECRET
(When Filled In)

OFFICE OF PERSONNEL

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION
Three

4. COMMENTS CONCERNING POTENTIAL
From subject's performance here it appears that his potential in the records management field may be limited only by his lack of formal higher education, and that even in this respect he could overcome this deficiency with some training. His forcefulness and boundless energy would unquestionably inspire any subordinates to higher performance. He has an intense interest in records work and an ability to grasp complex problems and make quick decisions.

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL
None

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS
None

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

X = HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
3	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	5	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	5	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	3	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITIES	3	23. IS THOUGHTFUL OF OTHERS
4	4. IS ANALYTIC IN HIS THINKING	3	14. ADMITS HIS ERRORS	5	24. COPES WELL UNDER PRESSURE
5	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	3	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGEMENT
5	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	3	26. IS SECURITY CONSCIOUS
5	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	X	27. IS VERSATILE
5	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. GETS THINGS DONE	5	19. THINKS CLEARLY	4	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
X	10. CAN COPE WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	5	30. DOES NOT REQUIRE FREQUENT AND CONTINUOUS SUPERVISION

SECRET

SECRET

(When Filled)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8. of Section "A" below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SEX 4. SERVICE DESIGNATION
WOODS James 20 Feb 1928 M SD: DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT 6. OFFICIAL POSITION TITLE
FI RI ARO OS-013C.35-7 Intel Analyst
7. GRADE 8. DATE REPORT DUE IN OP 9. PERIOD COVERED BY THIS REPORT (Inclusive dates)
OS-7 21 January 1957 - 15 July 1957
10. TYPE OF REPORT (Check one) INITIAL REASSIGNMENT SUPERVISOR SPECIAL (Specify)
ANNUAL X REASSIGNMENT EMPLOYEE

SECTION B.

CERTIFICATION

3. FOR THE RATER: THIS REPORT HAS OR HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.
Mr. Woods is on temporary duty in Mexico City, Mexico.

A. CHECK (X) APPROPRIATE STATEMENTS:

X THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL. IF INDIVIDUAL IS RATED "1" IN C1 OR D, A WARNING LETTER WAS SENT TO HIM & A COPY ATTACHED TO THIS REPORT.
THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS. I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify)
I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.

D. THIS DATE 22 July 1957
SUPERVISOR'S NAME AND SIGNATURE James L. Bromlon
SUPERVISOR'S OFFICIAL TITLE Coordinator, 201 Control Unit, RI/Analysis Section

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY DATE
Posted Pos. Control [Signature] 7/23/57
Reviewed by PUD D. L. REEDY 10-8-57

CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE 22 July 1957
B. TYPED NAME AND SIGNATURE OF REVIEWING OFFICIAL [Signature]
C. OFFICIAL TITLE OF REVIEWING OFFICIAL Supervisor, RI/Analysis Section

SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

- 1 - DOES NOT PERFORM DUTIES ADEQUATELY, HE IS INCOMPETENT.
2 - BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY REVEALS SOME AREA OF NEARNESS.
4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
5 - A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS: Mr. Woods departed for temporary duty on 9 Feb 1957. His last Fitness Report was completed on 5 Feb 1957, just prior to his departure. Reports from the station indicate the he is doing a commendable job.

AUG 16 3:19 PM '57

SECRET
(When Filled In)

1. RATINGS ON PERFORMANCE OF MAIL ROOM PERSONNEL

DIRECTIONS:

- State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.
- Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.
- For supervisors, ability to supervise is rated on a specific duty (do not rate as supervisors those who supervise a secretary only).
- Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- Two individuals with the same job may be performing different duties. If so, rate them on different duties.

1. Be specific. Examples of the kind of duties that might be rated are:
- | | | |
|-----------------------------|--------------------------------|--------------------------------|
| ORAL BRIEFING | HAS AND USES AREA KNOWLEDGE | CONDUCTS INTERROGATIONS |
| GIVING LECTURES | DEVELOPS NEW PROGRAMS | PREPARES SUMMARIES |
| CONDUCTING SEMINARS | ANALYZES INDUSTRIAL REPORTS | TRANSLATES GERMAN |
| WRITING TECHNICAL REPORTS | MANAGES FILES | DEBRIEFING SOURCES |
| CONDUCTING EXTERNAL LIAISON | OPERATES RADIO | KEEPS BOOKS |
| TYPING | COORDINATES WITH OTHER OFFICES | DRIVES TRUCK |
| TAKING DICTATION | WRITES REGULATIONS | MAINTAINS AIR CONDITIONING |
| SUPERVISING | PREPARES CORRESPONDENCE | EVALUATES SIGNIFICANCE OF DATA |
2. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

DESCRIPTIVE RATING NUMBER	1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS
	2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY	7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY
	3 - PERFORMS THIS DUTY ACCEPTABLY	
	4 - PERFORMS THIS DUTY IN A COMPETENT MANNER	
	5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB	

SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.

SECTION 2. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.

- | | |
|---------------|-----------------------------------------------------------------------------------------------------------------------------|
| RATING NUMBER | 1 - DEFINITELY UNSUITABLE... HE SHOULD BE SEPARATED |
| | 2 - OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW |
| | 3 - A BARELY ACCEPTABLE EMPLOYEE... BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION |
| | 4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION |
| | 5 - A FINE EMPLOYEE... HAS SOME OUTSTANDING STRENGTHS |
| | 6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION |
| | 7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION |

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? YES NO. IF YES, EXPLAIN FULLY:

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, held and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CF no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SEX 4. SERVICE DESIGNATION
WOODS James 20 Feb 1928 M SD: DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT 6. OFFICIAL POSITION-TITLE
FI RI AAO OS-0132.35-7 Intel Analyst
7. GRADE 8. DATE REPORT DUE IN OP 9. PERIOD COVERED BY THIS REPORT (inclusive dates)
GS-7 21 January 1957 - 15 July 1957
10. TYPE OF REPORT (Check one) INITIAL REASSIGNMENT-SUPERVISOR SPECIAL (Specify)
ANNUAL REASSIGNMENT-EMPLOYEE

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED
A. THIS DATE B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR C. SUPERVISOR'S OFFICIAL TITLE
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.
A. THIS DATE B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL C. OFFICIAL TITLE OF REVIEWING OFFICIAL

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.
1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL
DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? Yes No
If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

Table with columns: ACTUAL, POTENTIAL, DESCRIPTIVE SITUATION. Rows include: 0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION; 1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION; 2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION; 3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION. Descriptive situations include: GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) where contact with immediate subordinates is frequent; GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors); GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level); WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT; WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION; WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX; OTHER (Specify).

OFFICE OF PERSONNEL
SECRET
(When Filled-In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS WITH THIS INDIVIDUAL HAS BEEN UNDER YOUR SUPERVISION
APR 16 3 19 1957

4. COMMENTS CONCERNING POTENTIAL
MAIL ROOM

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

- X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
- 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
- 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
- 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
- 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
	1. ABLE TO SEE ANOTHER'S POINT OF VIEW		11. HAD HIGH STANDARDS OF ACCOMPLISHMENT		21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES		12. SHOWS ORIGINALITY		22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
	3. HAS INITIATIVE		13. ACCEPTS RESPONSIBILITIES		23. IS THOUGHTFUL OF OTHERS
	4. IS ANALYTIC IN HIS THINKING		14. ADMITS HIS ERRORS		24. WORKS WELL UNDER PRESSURE
	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS		15. RESPONDS WELL TO SUPERVISION		25. DISPLAYS JUDGEMENT
	6. KNOWS WHEN TO SEEK ASSISTANCE		16. DOES HIS JOB WITHOUT STRONG SUPPORT		26. IS SECURITY CONSCIOUS
	7. CAN GET ALONG WITH PEOPLE		17. COMES UP WITH SOLUTIONS TO PROBLEMS		27. IS VERSATILE
	8. HAS MEMORY FOR FACTS		18. IS OBEYANT		28. HIS CRITICISM IS CONSTRUCTIVE
	9. GETS THINGS DONE		19. THINKS CLEARLY		29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
	10. CAN COPE WITH EMERGENCIES		20. COMPLETES ASSIGNMENTS WITHIN ALLOPABLE TIME LIMITS		30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report. FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials.

SECTION A. GENERAL

1. NAME (Last) - (First) (Middle) WOODS, James S. 2. DATE OF BIRTH 20 Feb 1928 3. SER M 4. SERVICE DESIGNATION SD&DI 5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT RI RI A&O 6. OFFICIAL POSITION TITLE OS-0132.35-7 Intel Analyst 7. GRADE GS-7 8. DATE REPORT DUE IN OF 21 Jan 57 9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 22 January 1956 - 20 January 1957 10. TYPE OF REPORT (Check one) INITIAL REASSIGNMENT - SUPERVISOR SPECIAL (Specify) X ANNUAL REASSIGNMENT - EMPLOYEE

SECTION B. CERTIFICATION

1. FOR THE RATER: THIS REPORT [X] HAS [] HAD NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

A. CHECK (X) APPROPRIATE STATEMENTS: THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL. THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS. I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.

B. THIS DATE 5 Feb 1957 C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR James L. Brogdon James L. Brogdon D. SUPERVISOR'S OFFICIAL TITLE Coordinator 201 Control Unit

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

Mr. Woods since return from foreign assignment has completed one temporary duty assignment and is preparing for another. He has applied the present headquarters work at the station registry on a standard equating with this evaluation. Posted Pos. Control 11 FEB 1957 Reviewed by RUD [Signature] 2-7-57

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

6. THIS DATE 5 Feb 1957 B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL John J. Murray, Jr. C. OFFICIAL TITLE OF REVIEWING OFFICIAL Supervisor, RI/AN Section

SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

- 1 - DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT. 2 - BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES. 3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS. 4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER. 5 - A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL. 6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

SECRET

(When Filled In)

FILE OF PERSONNEL

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

- State in the spaces below up to six of the *more* important SPECIFIC duties performed during the rating period. Place the most important first. Do not include *more* or unimportant duties.
- Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.
- For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).
- Compare in your mind, when possible, the individual being rated with others performing same duty at a similar level of responsibility.
- Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA

B. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

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MAIL ROOM

- | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>DESCRIPTIVE RATING NUMBER</p> <ol style="list-style-type: none"> 1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY 3 - PERFORMS THIS DUTY ACCEPTABLY 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER 5 - PERFORMS THIS DUTY IN SUCH A MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB | <ol style="list-style-type: none"> 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS 7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

SPECIFIC DUTY NO. 1 Analysis - subjective analysis of CE, FI and PP material.	RATING NUMBER 5	SPECIFIC DUTY NO. 4 Assignment Management - Organization & scheduling of work.	RATING NUMBER 5
SPECIFIC DUTY NO. 2 Analysis - Quantitative	RATING NUMBER 5	SPECIFIC DUTY NO. 5	RATING NUMBER
SPECIFIC DUTY NO. 3 Has and uses area knowledge.	RATING NUMBER 4	SPECIFIC DUTY NO. 6	RATING NUMBER

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.

During the short time Mr. Woods has been assigned to this office, he has very quickly grasped the essentials of his assignment; he knows when to seek guidance and is constantly striving to increase his knowledge and understanding of his assignment. He is extremely conscientious, accepts the responsibilities of his job and performs his duties commendably.

SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

- DIRECTIONS:** Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.
- DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED
 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW
 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION
 - OF THE SAME SUITABILITY AS MOST PEOPLE I FACE IN THE ORGANIZATION
 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS
 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION
 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? YES NO. IF YES, EXPLAIN FULLY:

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(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CE no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SEX 4. SERVICE DESIGNATION
WOODS, James S. 20 Feb 1928 M SDADI
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT 6. OFFICIAL POSITION TITLE
FI RI ALO OS-0132.35-7 Intel Analyst
7. GRADE 8. DATE REPORT DUE IN OF 9. PERIOD COVERED BY THIS REPORT (Inclusive dates)
OS-7 21 Jan 57 21 January 1956 - 20 January 1957
10. TYPE OF REPORT. (Check one) INITIAL ANNUAL REASSIGNMENT-SUPERVISOR REASSIGNMENT-EMPLOYEE SPECIAL (Specify)

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED
A. THIS DATE 5 Feb 1957 B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR James L. Brogdon C. SUPERVISOR'S OFFICIAL TITLE Coordinator 201 Control Unit
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND I HAVE NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.
A. THIS DATE 5 Feb 1957 B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL John J. Murray, Jr. C. OFFICIAL TITLE OF REVIEWING OFFICIAL Supervisor, RI/Analysis Section

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES
RATING NUMBER 5

2. SUPERVISORY POTENTIAL
DIRECTIONS Answer this question: Has this person the ability to be a supervisor? Yes No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUFFICIENT TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

Table with columns: ACTUAL, POTENTIAL, DESCRIPTIVE SITUATION. Rows describe various supervisory situations like 'A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) where contact with immediate subordinates is frequent (First line supervisor)'.

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(When Filled In)

OFFICE OF PERSONNEL

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION:
Three Months

4. COMMENTS CONCERNING POTENTIAL

Mr. Woods is lacking in formal education, however, he has intelligence, initiative and ability and with continued on-the-job experience is capable of developing into a good supervisor of a section in RI or in operating the Registry Section of a field installation.

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SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

Training within the established FI/RI pattern.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

- X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
- 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
- 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
- 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
- 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
3	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	5	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	3	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
4	3. HAS INITIATIVE	4	13. ACCEPTS RESPONSIBILITIES	4	23. IS TOLERANT OF OTHERS
4	4. IS ANALYTIC IN HIS THINKING	3	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
4	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	3	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGMENT
3	6. KNOWS WHEN TO SEEK ASSISTANCE	4	16. DOES HIS JOB WITHOUT STRONG SUPPORT	4	26. IS SECURITY CONSCIOUS
5	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	4	27. IS VERSATILE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	4	28. HIS CONVICTION IS CONSTRUCTIVE
5	9. GETS THINGS DONE	4	19. THINKS CLEARLY	5	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
5	10. CAN COPE WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	3	30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

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(When Filled In)

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FIELD FITNESS REPORT

The Fitness Report is an important factor in organization personnel management. It seeks to provide:

1. The organization selection board with information of value when considering the application of an individual for membership in the career staff; and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

TO THE FIELD ADMINISTRATIVE OR PERSONNEL OFFICER: Consult current field administrative instructions regarding the initiation and transmittal of this report to headquarters.

TO THE FIELD SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as

revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows where he stands. DATE

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

Approved For Control *WHR* 28 MAY 1956

SECTION I

LEAVE BLANK - FOR HEADQUARTERS USE ONLY		1. DATE OF BIRTH	2. SEX	3. SERVICE DESIGNATION
James S. Woods		25 Feb. 1928	M	DI
4. GRADE	5. STATION DESIGNATION (Current)			
GS-7	KOBA/Hqs			
6. DUE DATE OF THIS REPORT		7. PERIOD COVERED BY THIS REPORT (Inclusive dates)		
April 1956		15 April 1955 - 15 April 1956		

SECTION II (To be completed by field supervisor)

1. CURRENT POSITION	2. DATE ASSUMED RESPONSIBILITY FOR POSITION
Intelligence Analyst - CE	25 September 1954
3. STATE THE SPECIFIC ASSIGNMENTS OR TASKS WHICH ARE TYPICAL OF THOSE GIVEN TO THE EMPLOYEE DURING THE PAST THREE TO SIX MONTHS (List in order of frequency)	

ity

Subject is an intelligence analyst in the Personal File Section of the Records Integration Branch. Subject is responsible for the maintenance of agent records and personality files, and is responsible for making all KOBA file checks.

SECTION III (To be completed at headquarters only)

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

AUTHENTICATION OF REPORT AND SIGNATURES	
1. NAME OF RATER (True)	2. NAME OF REVIEWING OFFICIAL IN FIELD (True)
Agnes M. Primo	Paul B. Breitzwiser
3. THIS REPORT <input checked="" type="checkbox"/> WAS <input type="checkbox"/> WAS NOT SHOWN TO THE INDIVIDUAL BEING RATED.	
4. DATE REPORT AUTHENTICATED AT Hqs.	5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL OFFICER AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE FITNESS REPORT AND SIGNATURES
1 May 1956	<i>William E. Nelson</i> William E. Nelson, CEE/1

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

SECTION IV

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply in some degree to most people. On the right hand side of the page are four major categories of descriptions. The table within each category is divided into three small blocks; this is to allow you to make finer distinctions if you so desire. Look at the statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means that you have the definite opinion that the description is not at all suited to the individual.

STATEMENTS	NOT OR SERVED	CATEGORIES				
		DOES NOT APPLY	APPLIES TO A LIMITED DEGREE	APPLIES TO A REASONABLE DEGREE	APPLIES TO AN ABOVE AVERAGE DEGREE	APPLIES TO AN OUTSTANDING DEGREE
A. ABLE TO SEE ANOTHER'S POINT OF VIEW.	SAMPLES		X			
B. PRACTICAL.					X	
1. A GOOD REPORTER OF EVENTS.	X					
2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.				X		
3. CAUTIOUS IN ACTION.				X		
4. HAS INITIATIVE.					X	
5. UNEMOTIONAL.				X		
6. ANALYTIC IN HIS THINKING.				X		
7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.				X		
8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.				X		
9. HAS SENSE OF HUMOR.				X		
10. KNOWS WHEN TO SEEK ASSISTANCE.				X		
11. CALM.				X		
12. CAN GET ALONG WITH PEOPLE.				X		
13. MEMORY FOR FACTS.				X		
14. GETS THINGS DONE.					X	
15. KEEPS ORIENTED TOWARD LONG TERM GOALS.					X	
16. CAN COPE WITH EMERGENCIES.					X	
17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.					X	
18. HAS STAMINA; CAN KEEP GOING A LONG TIME.					X	
19. HAS WIDE RANGE OF INFORMATION.				X		
20. SHOWS ORIGINALITY.				X		
21. ACCEPTS RESPONSIBILITIES.					X	
22. ADMITS HIS ERRORS.				X		
23. RESPONDS WELL TO SUPERVISION.				X		
24. EVEN DISPOSITION.				X		
25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT.				X		

SECRET
(When Filled In)

28. CAN THINK ON HIS FEET.						X				
27. COMES UP WITH SOLUTIONS TO PROBLEMS.						X				
26. STIMULATING TO ASSOCIATES; A "SPARK PLUG".									X	
25. TOUGH MINDED.						X				
24. OBSERVANT.						X				
23. CAPABLE.						X				
22. CLEAR THINKING.						X				
21. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS.								X		
20. EVALUATED SELF REALISTICALLY.						X				
19. WELL INFORMED ABOUT CURRENT EVENTS.	X									
18. DELIBERATE.						X				
17. EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES.						X				
16. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS.								X		
15. THOUGHTFUL OF OTHERS.						X				
14. WORKS WELL UNDER PRESSURE.								X		
13. DISPLAYS JUDGMENT.						X				
12. GIVES CREDIT WHERE CREDIT IS DUE.						X				
11. HAS DRIVE.								X		
10. IS SECURITY CONSCIOUS.								X		
9. VERSATILE.						X				
8. HIS CRITICISM IS CONSTRUCTIVE.						X				
7. ABLE TO INFLUENCE OTHERS.						X				
6. FACILITATES SMOOTH OPERATION OF HIS OFFICE.						X				
5. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION.								X		
4. A GOOD SUPERVISOR.						X				

SECTION V

A. WHAT ARE HIS OUTSTANDING STRENGTHS?

Subject is conscientious, hard-working and more than willing to work long hours. Subject has a good background and experience in maintaining agent records. Subject has assumed his present responsibilities with a minimum of supervision.

B. WHAT ARE HIS OUTSTANDING WEAKNESSES?

Subject is weak in his ability to express himself in writing.

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(When Filled In)

OFFICE OF PERSONNEL

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUIRES AND ALL OTHER CONSIDERATIONS:

Subject's stamina and persistence in accomplishing his tasks in a minimum amount of time outweigh his weakness.

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D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? NO YES. IF YES, WHY?

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E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

Recommend training in Phase II and III

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A,B,C,D

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
- 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING; HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? NO YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the organization.

- 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE ORGANIZATION; WILL DEFINITELY LEAVE THE ORGANIZATION AT THE FIRST OPPORTUNITY.
- 2. HAS STRONG NEGATIVE ATTITUDE TOWARD ORGANIZATION; IRKED BY RESTRICTIONS; REGARDS ORGANIZATION AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE ORGANIZATION; BOTHERED BY MINOR FRUSTRATIONS; WILL QUIT IF THESE CONTINUE.
- 4. HIS ATTITUDE TOWARD THE ORGANIZATION IS INDIFFERENT; HAS "WAIT AND SEE" ATTITUDE; WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD ORGANIZATION; MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR ORGANIZATION; THINKS IN TERMS OF A CAREER IN THE ORGANIZATION.
- 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE ORGANIZATION; BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE ORGANIZATION.
- 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE ORGANIZATION; WILL PROBABLY NEVER LEAVE FOR WORKING ANY PLACE BUT IN THE ORGANIZATION.

D. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities than normally indicated by promotion.

- 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating; skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- 2. OF DOUBTFUL SUITABILITY; WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- 3. A BARELY ACCEPTABLE EMPLOYEE; DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- 4. A TYPICAL EMPLOYEE; HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE ORGANIZATION.
- 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION.
- 7. EQUALLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION.

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(When Filled In)

FIELD FITNESS REPORT

COPIED

The Fitness Report is an important factor in organization personnel management. It seeks to provide:
1. The organization selection board with information of value when considering the application of an individual for membership in the career staff, and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

TO THE FIELD ADMINISTRATIVE OR PERSONNEL OFFICER: Consult current field administrative instructions regarding the initiation and transmittal of this report to headquarters.

TO THE FIELD SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as

revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he should be acquainted with the

A

Reviewed by FUD

R.G.W. 5/22/55
R.W.K.

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

SECTION I

LEAVE BLANK - FOR HEADQUARTERS USE ONLY		1. DATE OF BIRTH	2. SER	3. SERVICE DESIGNATION
James S. Woods		25 Feb 1928	M	SD-D SD-D
4. GRADE	5. STATION DESIGNATION (Current)			
GS-5	Korea Mission Headquarters			
6. DUE DATE OF THIS REPORT	7. PERIOD COVERED BY THIS REPORT (Inclusive dates)			
	1 November 1954 - 1/4 April 1955			

SECTION II (To be completed by field supervisor)

1. CURRENT POSITION	2. DATE ASSUMED RESPONSIBILITY FOR POSITION
Intelligence Analyst - CE 0136.52	25 September 1955
3. STATE THE SPECIFIC ASSIGNMENTS OR TASKS WHICH ARE TYPICAL OF THOSE GIVEN TO THE EMPLOYEE DURING THE PAST THREE TO SIX MONTHS (List in order of frequency)	

Subject is an intelligence analyst in the Personality Files Section of the Records Integration Branch. Subject is responsible for the maintenance of agent records and personality files, and is responsible for making all Korea Mission file checks.

SECTION III (To be completed at headquarters only)

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

AUTHENTICATION OF REPORT AND SIGNATURES	
1. NAME OF RATER (True)	2. NAME OF REVIEWING OFFICIAL IN FIELD (True)
Agnes M. Irine	John L. Hart
3. THIS REPORT <input type="checkbox"/> WAS <input type="checkbox"/> WAS NOT SHOWN TO THE INDIVIDUAL BEING RATED.	
4. DATE REPORT AUTHENTICATED AT HQS.	5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL OFFICER AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE FITNESS REPORT AND SIGNATURES
29 April 55	William E. Nelson

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

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(When Filled In)

SECTION IV

OFFICE OF PERSONNEL

This section is provided as an aid in describing the individual. Your description is not responsible or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply to most people. On the right hand side of the page are four major categories of descriptions. The second category is divided into three small blocks; this is to allow you to make finer distinctions if you so desire. At the statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means you have the definite notion that the description is not at all suited to the individual.

STATEMENTS	CATEGORIES	SAMPLES					
		NOT OBSERVED	DOES NOT APPLY	APPLIES TO A LIMITED DEGREE	APPLIES TO A REASONABLE DEGREE	APPLIES TO AN ABOVE AVERAGE DEGREE	APPLIES TO AN OUTSTANDING DEGREE
A. ABLE TO SEE ANOTHER'S POINT OF VIEW.			X				
B. PRACTICAL.						X	
1. A GOOD REPORTER OF EVENTS.			X				
2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.				X			
3. CAUTIOUS IN ACTION.					X		
4. HAS INITIATIVE.						X	
5. UNEMOTIONAL.					X		
6. ANALYTIC IN HIS THINKING.					X		
7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.					X		
8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.					X		
9. HAS SENSE OF HUMOR.					X		
10. KNOWS WHEN TO SEEK ASSISTANCE.					X		
11. CALM.					X		
12. CAN GET ALONG WITH PEOPLE.					X		
13. MEMORY FOR FACTS.					X		
14. GETS THINGS DONE.						X	
15. KEEPS ORIENTED TOWARD LONG TERM GOALS.						X	
16. CAN COPE WITH EMERGENCIES.						X	
17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.						X	
18. HAS STAMINA; CAN KEEP GOING A LONG TIME.						X	
19. HAS WIDE RANGE OF INFORMATION.					X		
20. SHOWS ORIGINALITY.					X		
21. ACCEPTS RESPONSIBILITIES.						X	
22. ADMITS HIS ERRORS.					X		
23. RESPONDS WELL TO SUPERVISION.					X		
24. EVEN DISPOSITION.					X		
25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT.					X		

SECRET
(When Filled In)

26. CAN THINK ON HIS FEET.						X													
27. COMES UP WITH SOLUTIONS TO PROBLEMS.						X													
28. STIMULATING TO ASSOCIATES: A "SPARK PLUG".										X									
29. TOUGH MINDED.						X													
30. OBSERVANT.						X													
31. CAPABLE.						X													
32. CLEAR THINKING.						X													
33. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS.										X									
34. EVALUATES SELF REALISTICALLY.						X													
35. WELL INFORMED ABOUT CURRENT EVENTS.			X																
36. DELIBERATE.						X													
37. EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES.						X													
38. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS.										X									
39. THOUGHTFUL OF OTHERS.						X													
40. WORKS WELL UNDER PRESSURE.										X									
41. DISPLAYS JUDGEMENT.						X													
42. GIVES CREDIT WHERE CREDIT IS DUE.						X													
43. HAS DRIVE.										X									
44. IS SECURITY CONSCIOUS.										X									
45. VERSATILE.						X													
46. HIS CRITICISM IS CONSTRUCTIVE.						X													
47. ABLE TO INFLUENCE OTHERS.						X													
48. FACILITATES SMOOTH OPERATION OF HIS OFFICE.						X													
49. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION.										X									
50. A GOOD SUPERVISOR.						X													

SECTION V

A. WHAT ARE HIS OUTSTANDING STRENGTHS?

Subject is conscientious, hard-working, and more than willing to work long hours. He has a good background and experience in maintaining agent records. Subject has assumed his present responsibilities with a minimum of supervision.

B. WHAT ARE HIS OUTSTANDING WEAKNESSES?

Subject is weak in his ability to express himself in writing.

SECRET

SECRET
(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGNS ALL OTHER CONSIDERATIONS:

Subject's stamina and persistence in accomplishing his tasks in ^{8 43 AM} amount of time outweigh his weaknesses.

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? NO YES. IF YES, WHY?

MAY 16 8 43 AM '55

MAIL ROOM

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

Recommend training in Phase II and III

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, & D

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
- 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? NO YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said; his actions, and any other indications, give your opinion of this person's attitude toward the organization.

- 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE ORGANIZATION... WILL DEFINITELY LEAVE THE ORGANIZATION AT THE FIRST OPPORTUNITY.
- 2. HAS STRONG NEGATIVE ATTITUDE TOWARD ORGANIZATION... FRANK BY RESTRICTIONS... REGARDS ORGANIZATION AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE ORGANIZATION... BOTHERED BY MINOR FRUSTRATIONS... WILL QUIT IF THESE CONTINUE.
- 4. HIS ATTITUDE TOWARD THE ORGANIZATION IS INDIFFERENT... HAS "WAIT AND SEE" ATTITUDE... WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD ORGANIZATION... MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR ORGANIZATION... THINKS IN TERMS OF A CAREER IN THE ORGANIZATION.
- 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE ORGANIZATION... BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE ORGANIZATION.
- 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE ORGANIZATION... WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE ORGANIZATION.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

- 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating, skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- 2. OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- 3. A BARELY ACCEPTABLE EMPLOYEE... DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- 4. A TYPICAL EMPLOYEE... HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE ORGANIZATION.
- 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION.
- 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION.

SECRET
SECURITY INFORMATION

FE 9 JWC/DV 104 19		DATE 27 Jm 24 Jamesy	
PERSONNEL EVALUATION REPORT			
Items 1 through 6 will be completed by Administrative or Personnel Officer			
1. NAME (Last)	(First)	(Middle)	7. GRADE
WOODS, James S.			GS-5
3. POSITION TITLE		Intel. Anal. CD-FT	
4. OFFICE	STAFF OR DIVISION	BRANCH	<input checked="" type="checkbox"/> DEPT'L. <input type="checkbox"/> IF FIELD, SPECIFY STATION
DDP/FI/RI	P & R Branch	Consol Section	<input type="checkbox"/> FIELD
5. PERIOD COVERED BY REPORT		6. TYPE OF REPORT	
From	To	<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Annual <input type="checkbox"/> Special
21 Apr. 53	20 Apr. 54	<input type="checkbox"/> Reassignment	<input type="checkbox"/> Reassignment of Supervisor
Items 7 through 10 will be completed by the person evaluated			
7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.			
As senior analyst on the EE/FI/G/Z area my duties consist of:			
(A) Consolidating personality files which entails the following: (1) Make a complete search in Index on all references pertaining to the subject, (2) gathering all references in RI/Files, (3) analyzing documents for inclusion in ZOI, (4) preparing a summary of reference sheet which notes the disposition of all the documents put in the case.			
(B) Liaison with the area desk.			
(C) Supervising the work of the junior analyst.			
8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.			
Name of Course	Location	Length of Course	Date Completed
NONE			
9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED?			
Intelligence work at the desk level.			
IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS).			
Two years experience in RI.			
10.			
12 April 1954		<i>James S Woods</i>	
DATE		SIGNATURE	
Items 11 through 13 will be completed by Supervisor			
11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.			
Mr. Woods has performed his duties conscientiously and well. He possesses a great deal of energy, is extremely industrious and has maintained excellent relations in his liaison with the area desk.			

SECRET
SECURITY INFORMATION

OFFICE OF PERSONNEL

12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING?	
Mr. Woods has performed his duties most outstandingly by virtue of his formation and maintenance of excellent liaison relations.	
13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT?	
14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE.	
Mr. Woods has handled his present responsibilities admirably and I am certain he would be capable of handling additional ones as the opportunity occurs.	
15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.)	
Mr. Woods could qualify as an Intelligence Analyst in any of the appropriate section of RI.	
16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON?	
None at this time	
17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.	
18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.	
<u>13 April 54</u> DATE	<u>Harry D. Randall</u> SIGNATURE OF SUPERVISOR
19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in item 20.)	
<u>18 May 1954</u> DATE	<u>John K. Smith</u> SIGNATURE OF REVIEWING OFFICIAL
20. COMMENTS: (if necessary, may be continued on reverse side of cover sheet.)	
Subject transferred to FE effective 25 April 1954. <i>over</i>	

SECRET

SECRET
SECURITY INFORMATION

PERSONNEL EVALUATION REPORT												
<i>Items 1 through 6 will be completed by Administrative or Personnel Officer</i>												
1. NAME (Last) WOODS	(First) James	(Middle) S.	2. GRADE GS-4	3. POSITION TITLE File Clerk								
4. OFFICE DD/P	STAFF OR DIVISION FI	BRANCH FI	<input checked="" type="checkbox"/> DEPT'L. <input type="checkbox"/> FIELD	IF FIELD, SPECIFY STATION								
5. PERIOD COVERED BY REPORT from 4-21-52 to 4-21-53		6. TYPE OF REPORT <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Special <input type="checkbox"/> Reassignment <input type="checkbox"/> Reassignment of Supervisor										
<i>Items 7 through 10 will be completed by the person evaluated</i>												
<p>7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.</p> <p>Review and analyze material for consolidation of FOI Personality Files. This includes making a complete impartial name check in RI/CC index and a complete search for all material pertinent to the subject in the RI/Files. Also maintain liaison with the SACs.</p> <p>After reviewing documents, make up Cross References and any Document changes as necessary. Complete a Summary of References Form listing all references reviewed and the action taken on each.</p>												
<p>8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%; border-bottom: 1px solid black;">Name of Course</th> <th style="width: 20%; border-bottom: 1px solid black;">Location</th> <th style="width: 20%; border-bottom: 1px solid black;">Length of Course</th> <th style="width: 20%; border-bottom: 1px solid black;">Date Completed</th> </tr> </thead> <tbody> <tr> <td colspan="4" style="padding: 5px; text-align: center;">None</td> </tr> </tbody> </table>					Name of Course	Location	Length of Course	Date Completed	None			
Name of Course	Location	Length of Course	Date Completed									
None												
<p>9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED?</p> <p>Accounting.</p> <p>IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (AFFLUENCE, KNOWLEDGE, SKILLS).</p> <p>Two years of Accounting and law school.</p>												
<p>10.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black; padding: 5px;">9 April 1953</td> <td style="width: 60%; border-bottom: 1px solid black; padding: 5px; text-align: center;"><i>James S Woods</i></td> </tr> <tr> <td style="text-align: center; font-size: small;">DATE</td> <td style="text-align: center; font-size: small;">SIGNATURE</td> </tr> </table>					9 April 1953	<i>James S Woods</i>	DATE	SIGNATURE				
9 April 1953	<i>James S Woods</i>											
DATE	SIGNATURE											
<i>Items 11 through 12 will be completed by Supervisor</i>												
<p>11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.</p> <p>Mr. Woods' performance in this section has been very satisfactory. While still in a trainee position, he is learning the procedure of this section very well. He is extremely industrious and shows little inclination to waste time.</p>												

SECRET
SECURITY INFORMATION

12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING? Mr. Woods has been most outstanding by virtue of his industry.	
13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT?	
14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE. Mr. Woods has had little opportunity to show his ability, in this line, so far.	
15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.) Due to his position as trainee, other duties cannot be considered, but I feel that he is quite capable of filling any number of jobs in RI.	
16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON? None at this time.	
17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.	
18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.	
20 April 1953 DATE	Harry D. Randall SIGNATURE OF SUPERVISOR
19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in Item 20.) DATE	John K. Smith SIGNATURE OF REVIEWING OFFICIAL
20. COMMENTS: If necessary, may be continued on reverse side of cover sheet.	

SECRET

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE**
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

- 1 FOLLOW THESE GENERAL INSTRUCTIONS:**
- Read the back of the "Duplicate" carefully before you fill in the form.
 - Fill in BOTH COPIES of the form. Type or use ink.
 - Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last)	(first)	(middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER		
WOODS	James	Sauvie	FEB 20 1928	502	16	6806
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)			
010032						

3 MARK AN "X" IN ONE OF THE BOXES BELOW. (do NOT mark more than one):

Mark here if you **WANT BOTH** optional and regular insurance

(A)

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE
I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here if you **DO NOT WANT** OPTIONAL but do want regular insurance

(B)

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE
I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here if you **WANT NEITHER** regular nor optional insurance

(C)

WAIVER OF LIFE INSURANCE COVERAGE
I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

4 SIGN AND DATE. IF YOU MARKED BOX "A" OR "C", COMPLETE THE "STATISTICAL STUB," THEN RETURN THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.

SIGNATURE (do not print)

James J. Woods

DATE

4 MAR 1968

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

OFFICE PERSONNEL
RECEIVED
MAR 20 1 47 PM '68

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM No 176-7
JANUARY 1964
(For use only until April 16 1968)
176-101

C-O-N-F-I-D-E-N-T-I-A-L
(when filled in)

TRAINING REPORT

PERFORMANCE EVALUATION WORKSHOP

Student: James S. Woods Dates: 23-24 February 1978
Employee No: 010032 Office: ISS
Service Designation: D

COURSE OBJECTIVES

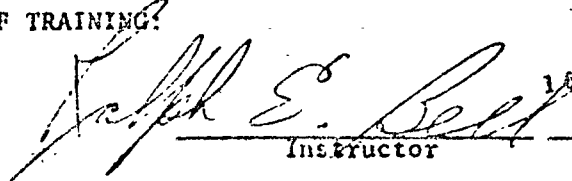
At the conclusion of this Workshop, students should:

1. Be familiar with the principal parts of the Agency's Personnel Evaluation Program;
2. Understand their roles as supervisors in the Performance Evaluation part of the overall Program;
3. Be better prepared to deal with some of the more troublesome problems encountered in performance evaluation;
4. Know how to prepare more useful Fitness Reports and conduct more effective FR interviews;
5. Understand how the Letter of Instruction relates to the performance evaluation process.

ACHIEVEMENT RECORD

This is a certificate of attendance only. No attempt was made to evaluate student achievement in the workshop.

FOR THE DIRECTOR OF TRAINING:



Instructor Date 10 MAR 1978

C-O-N-F-I-D-E-N-T-I-A-L
(when filled in)

CERTIFICATION OF SEPARATING EMPLOYEE

NAME (Last-First-Middle)

Shoats, James S.

MEMORANDUM FOR THE RECORD - ATTACH TO OFFICIAL PERSONNEL FOLDER

I hereby acknowledge the receipt of the following forms and/or information concerning separation from CIA as indicated by check mark:

- | | |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| / | 1. Standard Form 8 (Notice to Federal Employee about Unemployment Compensation) |
| DX | 2. Standard Form 55 (Notice of Conversion Privilege, Federal Employees' Group Life Insurance). |
| DX | 3. Standard Form 55 (Agency Certification of Insurance Status, Federal Employees' Group Life Insurance Act of 1954). |
| NA | 4. Standard Form 2302 (Application for Refund of Retirement Deductions). |
| | 5. Form 2595 (Authorization for Disposition of Paychecks).
<i>continue to back</i> |
| / | 6. <u>Only applicable to Retiree - Returnee</u> (resignee from overseas assignment) I have been advised of my right to have a medical examination before my separation from this Agency and of the importance of such a medical check to my health and well-being. |
| | 7. CSC Pamphlet 51 (Re-employment Rights of Federal Employees Performing Armed Forces Duty). |
| | 8. Instructions for returning to duty from Extended Leave or Active Military Service. |

Signature of Employee

James S Shoats

Date Signed

Address (Street, City, State, Zip Code)

304 MEADOW HALL DR.
ROCKVILLE, MD: 20851

Correspondence

OPTIONAL MAIL PERMIT NO. 1000

Overt

Con

C-O-N-F-I-D-E-N-T-I-A-L
(when filled in)

TRAINING REPORT

PERFORMANCE EVALUATION WORKSHOP

Student: James S. Woods Dates: 23-24 February 1978
Employee No: 010032 Office: ISS
Service Designation: D

COURSE OBJECTIVES

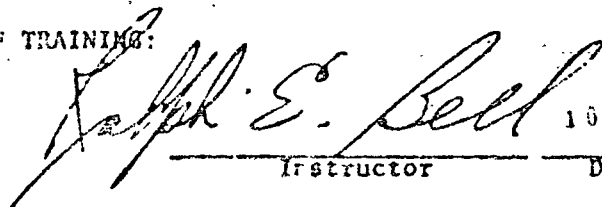
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1. Be familiar with the principal parts of the Agency's Personnel Evaluation Program;
2. Understand their roles as supervisors in the Performance Evaluation part of the overall Program;
3. Be better prepared to deal with some of the more troublesome problems encountered in performance evaluation;
4. Know how to prepare more useful Fitness Reports and conduct more effective PR interviews;
5. Understand how the Letter of Instruction relates to the performance evaluation process.

ACHIEVEMENT RECORD

This is a certificate of attendance only. No attempt was made to evaluate student achievement in the workshop.

FOR THE DIRECTOR OF TRAINING:



Instructor Date 10 Mar 1978

C-O-N-F-I-D-E-N-T-I-A-L
(when filled in)

ADMINISTRATIVE - INTERNAL USE ONLY



3 February 1977

MEMORANDUM FOR THE RECORD

FROM : ISS/Training Staff

SUBJECT: Document Analysis II for Records Management Officers

1. Jim Woods ^{-OPF} has satisfactorily completed the Document Analysis II Course given for Division and Staff Records Management Officers by ISS Training Officer, JoEllen S. McCann. Classes were held daily from 0900 to 1230 hours from 29 November through 10 December 1976.

2. The topics covered in the course were records principles and processing procedures used by Data Management Section analysts for initial input of correspondence into the DDO Records System. The students also covered the official files system and indexing criteria as they currently exist and discussed some of the drawbacks and possible systems changes we might expect in the next few years. Periodic exercises were given to test the students comprehension of topics discussed.

JoEllen McCann
JoEllen McCann

ADMINISTRATIVE - INTERNAL USE ONLY

20 JUL 1976

I, the undersigned, authorize the Office of Personnel
to give to CartBlanche whatever information is necessary
for me to obtain a credit card.

James S Woods
James S. Woods

*pro
7-21-76*

CERTIFICATE OF TRAINING

THIS IS TO CERTIFY THAT

JAMES WOODS

SUCCESSFULLY COMPLETED

SUPERVISORY COUNSELING WORKSHOP

ON

26 - 27 AUGUST 1976

INFORMATION SERVICES GROUP

Peggy Hall
CHIEF, ISG TRAINING

TRAINING REPORT
OFFICE OF TRAINING

This certifies that James S. Woods has successfully completed the Introduction to Micrographics Seminar #2 which was conducted from 24 July to 25 July 1974.

This seminar provides basic information on microphotography and explores the application of this technology in controlling overburdened and sometimes inefficient paperwork systems. Specific blocks of instruction include: Image Recording Techniques, Microfilm Formats, Viewers and Viewer-Printers, Indexing Methods, Computer Output Microfilm (COM), Micropublishing, and Development and Implementation of Agency Applications. Participants receive a portfolio of various samples of microforms, a Glossary of Micrographic Terms, and a Primer on Information Science.

FOR THE DIRECTOR OF TRAINING:

Edward A. Seroskie
Course Coordinator

Final Grade Report

- Grading System:**
 A - Superior Scholarship
 B - Good Scholarship
 C - Average Scholarship
 D - Passing Scholarship
 F(a) - Failure Academic
 F(b) - Failure Non-Attendance
 I - Incomplete
 WX - Withdrawal during first half of term
 WF - Withdrawal during second half of term
 WF - Withdrawal during second half of term
 X - Emergency withdrawal

UNIVERSITY OF MARYLAND
 EUROPEAN DIVISION - UNIVERSITY COLLEGE
 OFFICE OF THE REGISTRAR

Report of **WOODS, James S.**

Student Copy

Term **1**, Acad. Yr. **1971/72** at **Rome** Center

COURSE	Semester/Hours	GRADE
ITAL 111	3	B

Signature of Instructor: **DeSantis**

* If Incomplete is to be assigned, student must have attended three-fourths of class meetings. Indicate below remaining work, e.g. final exam, term paper, reports, etc.

Grade to date _____ Deadline date for completion, if established _____

The student is responsible for arranging with the instructor for completion of these requirements.

UMR 11 (5-72) (4-67)

Final Grade Report

- Grading System:**
 A - Superior Scholarship
 B - Good Scholarship
 C - Average Scholarship
 D - Passing Scholarship
 F(a) - Failure Academic
 F(b) - Failure Non-Attendance
 I - Incomplete
 WX - Withdrawal during first half of term
 WF - Withdrawal during second half of term
 WF - Withdrawal during second half of term
 X - Emergency withdrawal

UNIVERSITY OF MARYLAND
 EUROPEAN DIVISION - UNIVERSITY COLLEGE
 OFFICE OF THE REGISTRAR

Report of **WOODS, James S.**

Student Copy

Term **2**, Acad. Yr. **19 71/72** at **Rome** Center

COURSE	Semester/Hours	GRADE
ITAL 112	3	B

Signature of Instructor: **DeSantis**

* If Incomplete is to be assigned, student must have attended three-fourths of class meetings. Indicate below remaining work, e.g. final exam, term paper, reports, etc.

Grade to date _____ Deadline date for completion, if established _____

The student is responsible for arranging with the instructor for completion of these requirements.

UMR 11 (5-72) (4-67)

EC

Approved
(When Completed)

TRAINING REPORT

Americans Forced Orientation - Japan
16 Weeks 80-21 March 1961 6 Students

Student: WYNN, James H. Year of Entry: 1960
Officer: April 1952 Grade: GS-9 Office: FB

COURSE OBJECTIVES - CONTINUED FROM PAGE 10

The course was designed to provide the trainees with a general overview of the country of destination, including a briefing on "the Americans Abroad problem," the identification for the individual employee or dependent, and the Agency, practical advice for successful personal adjustment to foreign conditions of work and living in the area of assignment, useful information on life here, and guide lines for understanding the local problems. Advice includes cues for effective interpersonal relations in the particular country or region. Area information includes an analysis of the importance of the mission to the United States and descriptions of the people, the institutions, and current living conditions. The course offers lectures, panel discussions, films, slides, maps, stories, and selected newspaper and magazine material of interest to the trainees. The course concludes with a general review of the course objectives.

This is a continuation of the course... (faded text)

20 April 1961

/s/ WILLIAM E. COLVIER

14-00000
Form 100-100-100

U. S. DEPARTMENT OF STATE

Japan

15 Form 100-100-100-100 20-21 March 1961 6

Woods, Louise (Dependant, James R.)

Student:

Year of Birth:

Grades:

Office:

Office:

U. S. DEPARTMENT OF STATE

The course is designed to provide students for venturing of travel in the general area and country of destination. Included are a briefing on "The Americans Abroad problem," its implications for the individual employee or diplomat and the "theory," practical advice for successful personal adjustment to everyday problems of working and living in the area of assignment, useful information on the area, and other lines for understanding the major problems. Advice includes areas for effective interpersonal relationships in the particular country or region. Area information includes an analysis of the importance of the region to the United States and description of the people, the institutions, and current major activities. The course offers lectures, panel discussions, films, slide presentations, and a local resident for a personal insight into life in the area. A local resident will be available for a personal insight into life in the area.

This is a very short list of attendees. If you have any other names to add, please let me know.

26 April 1961

10/ ~~James R. Woods~~ E. Woods

SECRET

WRITING WORKSHOP (INTERMEDIATE) NO. 2

TRAINING EVALUATION

SECTION I: IDENTIFYING INFORMATION			
NAME WOODS, James B.	SEX M	DATES OF COURSE 26 October - 19 November 1959	NO. OF STUDENTS 17
DATE OF BIRTH 20 February 1928	EOB DATE April 1952	GRADE OR RANK GS-9	OFFICE FR/Administration
PROJECTED ASSIGNMENT OR PRESENT POSITION Records Officer			
SECTION II: OBJECTIVE OF THE COURSE			
To stimulate habits of thoughtful, self-critical writing for intelligence production.			

SECTION III: SPECIFIC CHARACTERIZATION OF THE COURSE

The class is conducted for 10 to 15 students. It meets the nine three-hour morning sessions over a period of four weeks. There are three sessions during the first week and two thereafter for three weeks. The course is run on the "learn by practice" system. A number of writing tests are given in class, and they are evaluated against national and Agency norms. The trainees also prepare written exercises and have an opportunity to rewrite some of them during later sessions. Students may use the form and substance of their own office's written product. Special attention is paid to logical organization, diction, sentence structure and other mechanics of writing. The trainees receive detailed comments on their papers and are encouraged to discuss special writing problems with the staff.

SECTION IV: HOW THE STUDENTS ARE EVALUATED

Staff members observe the student's writing ability, any change demonstrated, and application to the course material. The evaluation represents their agreed comments based on the student's total performance.

SECRET

8-E-C-R-E-T

SECTION V: REPORT OF STUDENT ACHIEVEMENT

Mr. Woods added to the good improvement in mechanics of expression he had achieved in the Basic Writing Workshop. He has now developed the ability to write smooth, compact, and readable sentences. He also learned to organize topics more effectively, and with further writing experience, he can develop the ability to write analytical papers of a professional caliber.

John F. Farrell
Chief Instructor

8-2-C-R-E-T

S-E-C-R-E-T

WRITING WORKSHOP (BASIC) NO. 2

TRAINING EVALUATION

SECTION I: IDENTIFYING INFORMATION			
NAME WOODS, James S.	SEX M	DATES OF COURSE 21 Sept. - 15 Oct. 1959	NO. OF STUDENTS 13
DATE OF BIRTH 20 February 1928	EOD DATE April 1952	GRADE OR RANK GS-9	OFFICE FE/Administration
PROJECTED ASSIGNMENT OR PRESENT POSITION Records Officer			
SECTION II: OBJECTIVE OF THE COURSE			
To stimulate habits of thoughtful, self-critical writing for intelligence production.			

SECTION III: SPECIFIC CHARACTERISTICS OF THE COURSE

The class is conducted for ten to fifteen students. It meets for two three-hour morning sessions over a period of four weeks. There are three sessions during the first week and two thereafter for three weeks. The course is run on the "learn by practice" system. A number of writing tests are given in class, and they are evaluated against national and Agency norms. The trainees also prepare written exercises and have an opportunity to rewrite some of them during later sessions. Students may use the form and substance of their own office's written product. Special attention is paid to logical organization, diction, sentence structure and other mechanics of writing. The trainees receive detailed comments on their papers and are encouraged to discuss special writing problems with the staff.

SECTION IV: HOW THE STUDENTS ARE EVALUATED

Staff members observe the student's writing ability, any change demonstrated, and application to the course material. The evaluation represents their agreed comments based on the student's total performance.

S-E-C-R-E-T

3-6-C-R-5-7

SECTION V: REPORT OF STUDENT ACHIEVEMENT

Mr. Woods considerably improved the clarity of his writing during the course, by reducing sentence errors and roundabout phrasing. His written papers reflected his gains in knowledge of basic rules of English usage. His achievement in the Writing Workshop (Basic) shows that Mr. Woods can develop good writing skills, and that he and the Agency would benefit if he took the Writing Workshop (Intermediate).

Frances C. Gemmill
Chief Instructor

3-6-C-R-5-7

S-1-C-P-E-T

TRAINING EVALUATION

ADMINISTRATIVE SUPPORT COURSE # 2

SECTION I: IDENTIFYING INFORMATION			
NAME Woods, James S.	SEX M	DATES OF COURSE 10 - 28 May 1954	NO. OF WEEKS 1st week-19 2nd & 3rd weeks-44
DATE OF BIRTH 21 February 1928	FOB DATE 21 April 1952	GRADE OR RANK GS-5	OFFICE FE/FI
PROJECTED ASSIGNMENT OR PRESENT POSITION Registry Analyst			
SECTION II: OBJECTIVES			
The objectives of this course are to provide the student with (1) an understanding of the inter-relationships between operating functions and administrative support functions; (2) an understanding of some of the basic principles and techniques of Agency operations and the organization and functions of the various clandestine components; (3) a knowledge of procedures, regulations, and problems peculiar to Logistics, Finance, and other areas of administrative support.			
SECTION III: SPECIFIC CHARACTERISTICS OF THE COURSE			
One week of the course is devoted to lectures in the area described in category 1 on reverse of this page. The material in categories 2 and 3 is presented both by lecture and by practical exercises during the remaining two weeks of the course. Categories 4 through 9 are concerned with the application of knowledge of Agency organization, structure, procedures and regulations in practical situations.			
SECTION IV: STUDENT'S PERFORMANCE			
The instructor should have every student's individual rating on this course. In the event this student is rated, the instructor should indicate the student's performance in the course with an allowance made for differences in age, education, experience, etc. These ratings are defined as follows:			
<p>EXCELLENT: The student indicated exceptional ability or proficiency in meeting this goal or objective; he demonstrated an unusually thorough knowledge of the material presented.</p> <p>SATISFACTORY: The student met this objective in a competent and effective manner; he demonstrated a good grasp and understanding of the material presented.</p> <p>UNSATISFACTORY: The student did not achieve this goal or objective; the student's performance indicated a serious lack of knowledge concerning material presented.</p>			
S-1-C-P-E-T			

S-E-C-R-E-T

MAJOR CATEGORIES	ORAT	SAT	LEG-LENT
1. Orientation in basic principles of clandestine activity.	2	30*	17
2. Knowledge of clandestine services command structure and organization.	5*	14	25
3. Knowledge of Agency and clandestine services regulations and administrative procedures.	2	28*	14
4. (A) Preparation of advance form; travel voucher (DOMESTIC) and entertainment reimbursement (DOMESTIC).	0	17	1*
(B) Preparation of travel voucher (FOREIGN) including computation of per diem and currency conversion.	1	15*	28
5. Preparation of Station Finance Reports.	3	5	16*
6. Preparation of forms used in a detached station for property records; knowledge of responsibility for property at the station.	2	20*	22
7. Preparation of form required for project presentation to the Project Review Committee.	1	30*	13
8. Preparation of cable form used at Headquarters writing message from material given, with use of accepted digits, punctuation, and abbreviations.	1	33*	9
9. Preparation of Headquarters and Field dispatch forms and Field pouch manifest.	0	24*	13

SECTION VI COMMENTS

Comments, especially on habits and characteristics, with particular reference to strong or weak points of the individual or agency, that might have influenced his performance in the course.

FOR THE DIRECTOR OF TRAINING:

Collynn S. Bayne
Supervisor of Staff Training

S-E-C-R-E-T

SECRET

TRAINING EVALUATION

SECTION I: IDENTIFYING INFORMATION						
Name Woods, James S.		Sex M	Course and Beginning Date PHASE I - ORIENTATION/9 - 19 April 54			
Date of Birth 23 February 1928	E O D April 1952	Grade or Rank GS-5	Office FE/PI			
Projected Assignment or Present Position Registry Analyst						
<p>This evaluation is based on a course of 120 hours given over a period of 3 weeks in which there were 89 students. The length of the course, number of students, nature of the course, skills and knowledge taught, and the opportunity for observing the individual student determine which sections of this report are used. These facts must also be considered in interpreting the evaluations which, therefore, should not be used as the sole basis for personnel decisions. THIS REPORT IS INTENDED PRIMARILY TO FURNISH INFORMATION AS TO HOW WELL THE STUDENT LEARNED THE SUBJECT MATTER OR SKILLS TAUGHT. In addition, observations of interest and importance are reported which can have significance only as they are related to other information. Unless otherwise stated, performance is evaluated in terms of standards set by instructors or in relation to the performance of others who have taken the course. For further information, consult the Training Evaluation Branch, Assessment and Evaluation Staff, Office of Training.</p>						
SECTION II: KNOWLEDGE						
Subject	Hrs	Rating				
		Fail	Poor	Sat	Exc	Sup
Introduction to Intelligence	80	5	12	26*	34	12
Communism and the U S S R	40	5	17	35*	31	7
<p>The numbers show how many students received each rating. An asterisk (*) shows the rating this student received.</p>						
SECTION III: SKILLS						
<p>The 'Course Instruction' column contains scores and/or ratings given by the instructional staff for skills which are specifically intended to be outcomes of the course. The 'Observation' column contains ratings by instructors and/or students concerning skills which have been observed for every student in a class but which have not been the subject of intensive instruction or practice.</p>						
Skill	Hrs.	Course Instruction		Observation		
		Objective Score	Rating or Evaluation	Av. Rating by Instructors	Av. Rating by Students	

SECTION IV: OBSERVATIONS of ATTITUDES or OTHER PERSONAL CHARACTERISTICS

During the course incidents were observed which suggested that this person:

	Yes	No		Yes	No
Had difficulty in getting along with others.		X	Lacked motivation for an Agency career.		X
Interfered with instructional and classroom activities.		X	Lacked sufficient security-mindedness.		X
			Lacked interest in the course.		X

Explanations of any 'Yes' answers to items above. Frequency of occurrence and number of persons observing these attitudes or characteristics are included.

SECTION V: COMMENTS

Comments, especially on habits or characteristics, with particular reference to strong and weak points of the individual, or anything that may have influenced his performance in the course are reported here.

Edward C. ...
Chief-Instructor

SECTION VI: ADJUSTED OVER-ALL EVALUATION

FOR OPTIONAL USE BY INSTRUCTORS

In terms of all factors observed during the course and taking into account this student's experience in the Agency, grade, and general area of work, an 'X' in one of the boxes shows the instructor's judgment of his performance in the course.

- He was inadequate in his performance.
- He was barely adequate in his performance and performed acceptably only in a limited range of assignments.
- He performed acceptably, but was barely adequate in some respects.
- He was a typically effective student who performed in a competent, dependable manner.
- He performed at a high level of competence.
- He performed at an extremely high level that only a few students have surpassed.

FOR OPTIONAL USE BY TRAINING OFFICERS

This evaluation, shown by an 'X' in one of the boxes, takes into account this training record, the student's age, grade, Area of experience, and projected assignment. It is included for the purpose of giving supervisors an estimate of the implications of the training evaluation report for the student's assignment and career potential.

- This is an inadequate performance.
- This is a barely adequate performance and raises questions concerning his suitability for his assignment.
- This is an acceptable performance but discloses possible areas of weakness.
- This is a satisfactory performance revealing a typically competent person.
- This performance reveals a high level of competence.
- This is an extremely competent performance that only a few persons of his background and position have surpassed.

Training Officer's Comments

...
Training Officer

SECRET

15

MEMORANDUM FOR: Chairman, Clandestine Service Personnel Staff

SUBJECT: James S. WOODS - Recommendation for Promotion

1. Subject has been in grade GS-10 since June 1968. Based on his outstanding performance as Chief of Registry in the Romo Station since June 30, 1971, he strongly merits promotion to grade GS-11 at this time. When Subject took over the responsibility for Registry a year ago, he found a system glutted with paper and bound up by a policy which discouraged getting rid of it. He found many procedures in force which were out of date, if not obsolete, and proposed streamlined procedures, which were adopted, to replace them. He asked for and was given the responsibility to analyze and distribute the cables, which had previously been a function of the Chief of Station's secretary. He recommended the discontinuance of the abstract system, which proposal had been adopted by most elements of the Station. He recommended a reduction in the retention period for cable and dispatch chronos. With the help of a TDY team here for the first half of CY 1972, he devised and instituted a program of purging the files. This program has resulted in the disposition of most of the departed Soviet files, a severe trimming of the true name files, and the review, reduction and up-dating of the project and operational files. All of this work was accompanied by appropriate name checks, entries on the index cards and selection of pertinent documents for transmittal to Headquarters. In summary, Subject performed a thorough "house-cleaning" of Station records in the full meaning of that phrase. This program is by no means finished. In fact, Subject has plans for continuing efforts along these lines which may exceed his tenure at this Station since he intends to return to Headquarters not later than May 1974. The on-going program includes a review and reorganization of the subject files, the encrypted 201's and the disposition (hopefully) of about 50 feet of microfilm. A corollary to these projects will be a significant reduction in the index cards, which at present lead to the microfilm and to other superfluous material we either have or will destroy.

2. The equally important aspect of records management, namely the introduction of procedures to lessen the likelihood

WARNING NOTICE
SENSITIVE INFORMATION SOURCES
AND METHODS INVOLVED

SECRET

CLASSIFIED BY <i>6196-44</i>
EACH ITEM ON THIS DECLASSIFICATION
SCHEDULE LISTED IN DECLASSIFICATION CATEGORY:
5 UNLESS INDICATED OTHERWISE (see or more)
AT THE END OF THE SCHEDULED OR
<i>PP-212</i>
(unless impossible insert date or event)

SECRET

-2-

if not prevent the reoccurrence of this pile-up of paper is not lost on this officer. He constantly thinks in terms of procedures and controls to accomplish this end.

3. Subject is dedicated, highly motivated, conscientious, and hard working. He reports to work each day an hour before the Station opens in order to distribute the cables by opening of business. He never hesitates to respond positively to any request for help. Indeed, he solicits work which he believes can be done more easily or more simply in his unit. In all respects, Subject is a trained, professional records management officer who is thoughtful as well as enthusiastic about his work.

4. It is strongly recommended that Subject be promoted to grade GS-11.

Archibald B. Roosevelt

Archibald B. Roosevelt, Jr.
Chief, European Division

SECRET

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(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION SHOWN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HMR 25-7, PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME OF EMPLOYEE (Last) (First) (Middle) SOCIAL SECURITY NUMBER
WOODS, JAMES SAVVIE **502 16 6806**

1. **MARITAL STATUS (Check one)**
 SINGLE MARRIED SEPARATED DIVORCED WIDOWED ANNULLED
 IF MARRIED, PLACE OF MARRIAGE: **Washington, D.C.** DATE OF MARRIAGE: **6 Aug 60**
 IF DIVORCED, PLACE OF DIVORCE DECREE: _____ DATE OF DECREE: _____

MEMBERS OF FAMILY

2. NAME OF SPOUSE: **LOUISE ANNE** ADDRESS (No. Street, City, State, Zip Code): **432 COLLEGE PKWY ROCKVILLE** TELEPHONE NO.: **224-0163**
 NAMES OF CHILDREN: **LAURA RENEE WOODS** ADDRESS: **432 COLLEGE PKWY ROCKVILLE, MD.** DATE OF BIRTH: **2/27/71**
 NAME OF FATHER (or male guardian): **ROSS A. WOODS - DECEASED** ADDRESS: _____ TELEPHONE NO.: _____
 NAME OF MOTHER, INCLUDING MAIDEN NAME (or female guardian): **SUSAN A. WOODS** ADDRESS: **FOREST RIVER, N. DAK.** TELEPHONE NO.: _____

WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY?
MOTHER & SISTER (husband is emergency contact in home)
 3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 50% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HR 22 15.1). SPECIFY NAMES AND RELATIONSHIP:
 NAME: _____ DATE OF BIRTH: _____ RELATIONSHIP: _____

PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

4. NAME (Mr., Mrs., Miss) (Last-First-Middle) RELATIONSHIP
FILAK, RICHARD **BROTHER-IN-LAW**
 HOME ADDRESS (No. Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE. HOME TELEPHONE NUMBER
521 HAMLIN ST. GRAND FORK, N. DAK. **701-775-4472**
 BUSINESS ADDRESS (No. Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE. BUSINESS TELEPHONE & EXTENSION

IS THE INDIVIDUAL NAMED ABOVE A MEMBER OF YOUR ORGANIZATION? (If "no" give name and address of organization he believes you work for.) YES NO
 IS THE INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "no" give name and address of person, if any, who can make such decisions in case of emergency.) YES NO
UNION TRUST CO. OF D.C.
 DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "no" explain why in item 6.) YES NO
 The persons named in item 2 or 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.

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(When Filled In)

5. VOLUNTARY ENTRIES		
Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.		
INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.		
UNION TRUST CO. OF D.C.		
ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF YES, DO YOU HAVE A JOINT ACCOUNT?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" where is document located?)	
UNION TRUST CO. OF D.C.		
HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" give name(s) and address)	
IN THE WILL		
HAVE YOU EXECUTED A POWER OF ATTORNEY?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If "Yes", who possess the power of attorney?)	
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS		
7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY (No Approval Required)		
RESIDENCE WHEN EMPLOYED (Full Address)	PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-3 (Full Address)	
8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-3) (To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)		
FULL ADDRESS	DEPUTY DIRECTOR OR DESIGNEE	DATE
	DIRECTOR OF PERSONNEL (when applicable per HR 22-3)	DATE
SIGNED AT	DATE	SIGNATURE
Hq	8 Mar 71	[Signature]

CONFIDENTIAL

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

FILE
DISPATCHED

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 7-26	MIDDLE
010038	WOODS	JAMES	S

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39	ENGLAND	40-42
			11	18	70		1			210

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREAS	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input checked="" type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. _____ DOCUMENT DATE/PERIOD _____

REMARKS _____

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE	SIGNATURE	
1/5/71	[Signature]	

**THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER**

30 June 1970

MEMORANDUM FOR: Chief, European Division
FROM : Chief of Station, London
SUBJECT : Promotion Recommendation -
James S. Woods

Subject, who has been in grade as a GS-10 just two years, has been Chief of the Registry of the London Station for eighteen months. Subject, fresh from a Saigon assignment, brought with him a broad and varied background of field experience (Far East) and several Headquarters' assignments. He has been in one or another aspect of records management work since he started with us as a very junior clerk in 1952.

Subject's fitness reports, since he has been in London, testify to the high regard in which he is held by the Station and the excellent results he has managed to achieve. When he arrived at the Station, the start had been made on a file reduction program but an enormous amount of organized work remained to be done. Subject set about it with great enthusiasm and a high degree of professional organization. As a result, the Registry inventory today is the leanest and the most efficient the Station has seen for many a long day, if ever before. To a great extent this can be laid at Subject's own door and he personally did much of the work. At the same time, Subject surveyed and reorganized the overall workload of the Registry and was finally able to recommend to the Station management a reduction of one Registry clerk. The smaller staff was certainly required a more intensive work effort on the part of Registry personnel, which has been attained without any loss of morale; in fact, quite the reverse.

Subject, therefore, emerges as a records management officer who has thoroughly learned his business and a hard-driving, sympathetic and successful supervisor. In the opinion of the Station management, Subject is already quite capable of taking over broader and more senior responsibilities in the records management field. In this respect, however, we do not believe he will be wasting his time in London by spending, as he currently plans to do, an additional year here on the completion of his tour in November. The London Registry, reflecting the multi-faceted work of the Station, is sufficiently complex an operation to warrant

Subject's continued attention.

In view of his really excellent performance and high promise, it is strongly recommended that Subject be promoted to GS-11.

/s/ Bronson Tweedy
COS

SECRET

REPORT OF SERVICE ABROAD												
TO: Office of Personnel, Transactions and Records Branch, Status Section												
SERIAL NO.			NAME									
1-8			LAST			FIRST			MIDDLE			
010032			(Print) WOODS			JIM			S			
INSTRUCTIONS												
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TOY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 86, REVISED.												
PCS DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - BASIC DATA	CODE	28	29	CODE		
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION	37	38	39	40-42		
11	18	68				5 - CANCELLATION	1			L. H. C. / 11/12 210		
TOY DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TOY (TRAVEL)	CODE	30	31	CODE		
25-26	27-28	29-30	31-32	33-34	35-36	4 - CORRECTION	37	38	39	40-42		
						5 - CANCELLATION						
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA												
SOURCE DOCUMENT AND CERTIFICATION												
TRAVEL VOUCHER						OPERATION						
CABLE						DAYS STATUS OR TIME AND ATTENDANCE REPORT						
OTHER (Specify)												
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE PERIOD						
						1-18-68						
REMARKS												
PREPARED BY			REPORT ANNOTATED TO CONTROL DOCUMENT			SOURCE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED						
REC			DATE									
C & A DIVISION, 2780			099:03000									
T & P DIVISION												
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER												

CONFIDENTIAL
(When Filled In)

IMPORTANT

Central Processing Branch has been charged with responsibility (OAM 20-6-dated October 1961) for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I heroby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 30 July 1962.

James A. Woods
Signature

15 NOV 68
crto

JAMES A. WOODS

CONFIDENTIAL
(When Filled In)

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 010032	(Print) Woods,	James	S.

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 98, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		37	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	1		Vietnam	40-42 7/70

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		37	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 5 - CANCELLATION				40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify) <i>telepouch</i>	

DOCUMENT IDENTIFICATION NO. <i>FVST 31976</i>	DOCUMENT DATE/PERIOD <i>10/3/68</i>
--------------------------------------------------	----------------------------------------

REMARKS

PREPARED BY UCO	REPORT APPROVED OR CONTROL DOCUMENT <i>[Signature]</i>	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
C S L DIVISION, CYR.	DATE <i>10/15/68</i>	SIGNATURE <i>[Signature]</i>
C S T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

King

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 010032	(Print) <i>Woodward</i>	<i>James</i>	<i>S.</i>

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 99, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1	37	38 39	40-42
01	1	467					1		Vietnam 772

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1	37	38 39	40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

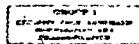
TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. *764* DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE <i>5/22/61</i>	SIGNATURE <i>L. Howard</i>
C & L DIVISION, CYBER.		
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



CONFIDENTIAL
(When Filled In)

I hereby acknowledge that I have read and understand the contents of Handbook 20-4, Employee Conduct, dated 7 October 1963, and the information brochure for PCS returns, dated May 1964.

James S. Woods
Signature

JAMES S. WOODS

28 NOV 66
Date

CONFIDENTIAL
(When Filled In)

SECRET
(When Filled In)

19 December 1966

MEMORANDUM FOR: **Mr. James S. Woods**

THROUGH : Head of ^{CS} Career Service

SUBJECT : Notification of Designation as a Participant
in the CIA Retirement and Disability System

1. I have determined that you meet the criteria outlined in HR 20-50 for designation as a participant in the CIA Retirement and Disability System. Your designation as a participant was made effective ~~18 December 1966~~.

2. You are hereby notified of your right to appeal this action to the Director of Central Intelligence as specified in HR 20-50. Such appeal must be received in the Office of the Director not later than 30 calendar days from the date of this memorandum.



Emmett D. Echols
Director of Personnel

SECRET

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO: Office of Personnel, Statistical Reporting Branch, ROOM 5 E 2506 Headquarters

EMPLOYEE SERIAL NO. 1-6	NAME OF EMPLOYEE			OFFICE/COMPONENT 28-36
	LAST	FIRST	MIDDLE	
010032	Woods	James	S	45

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	ARRIVAL				DEPARTURE			COUNTRY	OMIT
	CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1 - PCS (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39	Japan	40-42
3 - CORRECTION									
5 - CANCELLATION	1	01	24	66	09	24	66		375

TDY DATES OF SERVICE

TYPE OF DATA	DEPARTURE				RETURN			AREA(S)	OMIT
	CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR		
2 - TDY (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39		40-42
4 - CORRECTION									
5 - CANCELLATION									

SOURCE OF RECORD DOCUMENT

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISTRICT
<input type="checkbox"/> CABLE	<input checked="" type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
	5/28 - 9/24/66

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED ON SOURCE DOCUMENT	ABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
C S L DIVISION	DATE	SIGNATURE
<input checked="" type="checkbox"/> C S T DIVISION	10/17/66	D. B. White

CONFIDENTIAL
(When Filled In)

TRAVEL AGREEMENT BY STAFF EMPLOYEES ASSIGNED TO PERMANENT
DUTY STATION OUTSIDE CONTINENTAL UNITED STATES

1. In accordance with the policy of the Central Intelligence Agency, I agree to serve outside the continental United States a minimum tour of 2 Years from the date of my arrival at my permanent post of duty, unless said tour is sooner terminated by the Government for its convenience, or it is terminated by the Agency for circumstances that are considered by it to be beyond my control.

2. It is understood and agreed that if I terminate for reasons within my control in less than 12 months from the date of arrival at said post, I shall reimburse CIA for all travel expenses, including storage and per diem, incurred in the transporting of myself, my dependents, my household and personal effects and my automobile to my permanent post of duty, and shall pay all return travel and transportation expenses to the United States.

3. It is further understood and agreed that if I terminate for reasons within my control subsequent to the twelfth month but prior to the completion of my tour of duty, I shall pay all return expenses for the travel and transportation of myself, my dependents, my household and personal effects and my automobile to the United States.

WITNESS:

Evelyn M. Flagg
OFFICE OF PERSONNEL
Evelyn M. Flagg

James S. Woods
(Employee)

James Savvie Woods

Date: 28 Nov 66


SECRET

23 MAR 1966

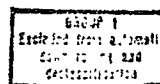
MEMORANDUM FOR: Head, Clandestine Services Career Service

**SUBJECT : Notification of Approval of
Quality Step Increase -
James S. Woods**

1. I am pleased to send to you the attached official notification of the approval of the Quality Step Increase which you recommended for this employee.
2. As this award is designed to encourage excellence by recognizing and rewarding the employee, may I ask that you arrange to have this Quality Step Increase presented at an appropriate ceremony.


Emmett D. Echols
Director of Personnel

SECRET



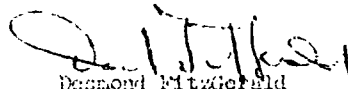
~~SECRET~~

29 MAR 1966

MEMORANDUM FOR: Mr. James S. Woods
SUBJECT : Quality Step Increase

1. I was pleased to learn that you have been granted a Quality Step Increase. Such a recognition is proof of the high esteem in which you are held by your supervisors in the Clandestine Services.

2. Please accept my personal best wishes. I am confident that your future performance will be of a continuing high quality.


Desmond Fitzgerald
Deputy Director for Plans

SECRET

EX-100
MAR 30 1966
COMMUNICATIONS SECTION

SECRET

CP-259

4 MAR 1956

MEMORANDUM FOR: Deputy Director for Plans
ATTENTION: DDP/OP
SUBJECT: Request for Quality Step Increase
for Mr. James S. Woods, GS-09

1. On the basis of the information presented below, it is recommended that a Quality Step Increase be approved for Mr. James S. Woods.

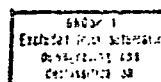
2. Mr. Woods entered on duty with the Agency in April 1952 as a GS-03 Records and File Clerk assigned to RID. Since that time Mr. Woods has served as a Records Analyst at Headquarters, in Koron and Atsugi, Manila, and since 1961 in the Central Registry Section of the Tokyo Station. Mr. Woods is 37 years old and has been in grade as a GS-09 since 1958.

3. Mr. Woods' exceptional performance is described by the Tokyo Station as follows:

"A. Mr. Woods is now on his second tour as Chief of the Tokyo Station Registry. This unit is located at Fuchu Air Station and handles all correspondence for all Station elements. In view of the fact that the Station is located in five different geographic locations, a great deal of responsibility is given to Mr. Woods to ensure that action responsibility on incoming cables is rapidly and properly assigned, dispatches are correctly routed and processed, correspondence from other local military agencies is correctly analyzed and routed, the twice-a-day courier system is functioning effectively, and the Station flexewriter is rapidly churning out priority dispatch traffic.

"B. The Registry is presently composed of six employees in addition to Mr. Woods, who is Chief of this unit. Mr. Woods does an exemplary job in supervising these employees with the result that the Station Registry is a smooth and well-functioning unit.

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SECRET

"C. In addition to his normal duties, Mr. Woods is constantly thinking of ways to increase the efficiency of the Station Registry, and to be of greater assistance to the Station as a whole. Several of his ideas have been adopted by the Station with a resulting increase in effectiveness. His positive approach to all problems and his cheerfulness and willingness to perform any task have benefited both the Station and the Agency.

"D. In view of Mr. Woods' demonstrated ability to provide leadership to the Station Registry unit, his positive approach to the solution of the many problems which daily beset this unit, it is strongly recommended that he be promoted from GS-09 to GS-10 at the earliest opportunity."

4. Mr. Woods has continued to perform in an over-all "Strong" manner as indicated in his recent fitness report. He recently planned and effectively implemented the move of the Cable Secretariat from one location to another. In a dispatch, dated 22 November 1965, the present Chief of Station, Tokyo, stated, "There is little I can add to my predecessor's recommendation, dated 9 November 1964, for promotion of Mr. Woods. He is performing his duties as Chief of the Tokyo Station Registry with efficiency and dispatch. He is a strong supervisor who constantly strives to achieve the maximum economy in the use of his personnel and materials."

5. Consideration has been given to the granting of an Honor and Merit Award to Mr. Woods, but in this particular case it appears that a Quality Step Increase is more appropriate.


William E. Colby
Chief, Far East Division

APPROVAL RECOMMENDED:


Secretary, CS Panel Section C

MAR 11
1966

MAR 11
1966

Date

SECRET

SECRET

SUBJECT: Request for Quality Step Increase
for Mr. James S. Woods, GS-09

CONCUR:

James Miller
DLP/OP

15 March 66
Date

APPROVED:

John J. Caldwell
for Director of Personnel

18 Mar '66
Date

SECRET

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO:

Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall

EMPLOYEE SERIAL NO. 1-6	NAME OF EMPLOYEE			OFFICE/COMPONENT 28-28
	LAST (Print)	FIRST	MIDDLE	
10032	WOODS,	JAMES S.		56

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	CODE	ARRIVAL			DEPARTURE			COUNTRY	OMIT						
		MONTH	DAY	YEAR	MONTH	DAY	YEAR								
1 - PCS (Basic)	27	28	29	30	31	32	33	34	35	36	37	38	39	JAPAN	40-42
3 - CORRECTION															
9 - CANCELLATION	1	04	15	61											375

TDY DATES OF SERVICE

TYPE OF DATA	CODE	DEPARTURE			RETURN			AREA(S)	OMIT						
		MONTH	DAY	YEAR	MONTH	DAY	YEAR								
2 - TDY (Basic)	27	28	29	30	31	32	33	34	35	36	37	38	39		40-42
4 - CORRECTION															
6 - CANCELLATION															

SOURCE OF RECORD DOCUMENT

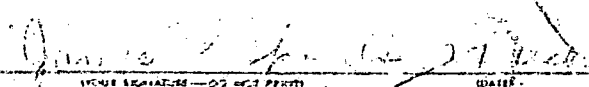
TRAVEL VOUCHER	DISPATCH
CABLE	<input checked="" type="checkbox"/> DUTY STATUS UP-TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
	30 MAR - 15 APR 1961

REMARKS

PREPARED BY	REPORT ANNOTATED ON SOURCE DOCUMENT	ADDITIONAL DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
FISCAL DIVISION	DATE	SIGNATURE
FINANCE DIVISION	26 JUNE 1961	<i>[Signature]</i>

344 09214

Standard Form No. 2800 CHAPTER 1-1 P.P.M. 6 (7-7-1960)		HEALTH BENEFITS REGISTRATION FORM FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959 <small>(Read Instructions on back of last page. Use only typewriter or ballpoint pen.)</small>			CARRIER'S CONTROL NO. 078-38																							
PART A ALL WHO REGISTER MUST FILL IN THIS PART.	1. NAME (LAST) (FIRST) (MIDDLE INITIAL) WOODS James S	2. DATE OF BIRTH (Month, Day, Year) MEMBER DAY YEAR 2 27 28		3. Are you now married? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>																								
	4. YOUR MAILING ADDRESS (APARTMENT AND STREET) (CITY AND ZONE NUMBER) (STATE) AIGD APO 925 San Francisco, Calif.			5. SEX MALE <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/>																								
	6. Are you covered by, or is any family member listed below covered by or enrolled in, a plan under the Federal Employees Health Benefits Act of 1959 (through the enrollment of another United States or District of Columbia Government employee or annuitant)? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		7. Place an "X" in proper box to show your annual basic salary range. UNDER \$4,000 <input type="checkbox"/> \$4,000 TO \$4,999 <input type="checkbox"/> \$5,000 TO \$9,999 <input checked="" type="checkbox"/> \$10,000 OR OVER <input type="checkbox"/>																									
PART B FILL IN THIS PART IF YOU WISH TO ENROLL IN A HEALTH BENEFITS PLAN. <small>If enrollment is for self only, answer item 1. If enrollment is for self and family, also answer item 2 and item 3, if it applies.</small>	1. I elect to enroll in a health benefits plan as shown below. I authorize deductions to be made from my salary, compensation, or annuity to cover my share of the cost of this enrollment. (Copy the information requested below from inside cover of brochure of the plan you select.)																											
	NAME OF PLAN Association Benefits Plan - Family		OPTIONAL PLAN OR PLAN High	ENROLLMENT CODE NUMBER 4 2 2																								
	2. In space below list all eligible family members without exception. List your wife or husband first, then your unmarried children under age 19, including legally adopted children, and stepchildren and illegitimate children who live with you in a regular parent-child relationship. Include also any unmarried child over 19 who became disabled before age 19 and who, because of the disability, is incapable of self-support. (Attach a doctor's certificate for a disabled child age 19 or over.)																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">NAMES OF FAMILY MEMBERS</th> <th style="width: 20%;">DATE OF BIRTH (Month, Day, Year)</th> <th style="width: 30%;">NAMES OF FAMILY MEMBERS</th> <th style="width: 20%;">DATE OF BIRTH (Month, Day, Year)</th> </tr> </thead> <tbody> <tr> <td>Wife or Husband Louise A.</td> <td>8 May 37</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	Wife or Husband Louise A.	8 May 37																		
NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)																									
Wife or Husband Louise A.	8 May 37																											
3. If you are a female (employee or annuitant)—does the family listed above include a husband who is incapable of self-support by reason of mental or physical disability which can be expected to continue for more than two years? (If answer is "Yes," attach a doctor's certificate.) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>																												
PART C FILL IN THIS PART IF YOU WISH NOT TO ENROLL OR IF YOU WISH TO CHANGE YOUR ENROLLMENT.	PLACE AN "X" IN ITEM 1 OR ITEM 2, WHICHEVER APPLIES AND ANSWER ITEM 3.																											
	1. I elect not to enroll in any plan under the Health Benefits Act. <input type="checkbox"/>		3. The reason for my election is: (Place an "X" in proper box.)																									
2. I elect to cancel my present enrollment under the Health Benefits Act. <input type="checkbox"/>		(a) I am covered by a plan under the Health Benefits Act through the enrollment of my husband, wife, or spouse. <input type="checkbox"/>																										
		(b) I am covered by a health insurance plan which is not under the Health Benefits Act. <input type="checkbox"/>																										
		(c) Any other reason. <input type="checkbox"/>																										
PART D FILL IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT.	I elect to change my enrollment as shown by the enrollment number and other information in item 8.																											
	1. Enrollment code number of present plan. 4 2 5		2. Number of event which permits change. (See table on back of application for proper number.) 8		3. Date of event which permits change. MEMBER DAY YEAR March 22 1964																							
PART E ALL WHO REGISTER MUST FILL IN THIS PART.	 HEALTH BENEFITS OFFICER (EMPLOYEE)				<small>WARNING—Any intentional false statement to this organization or willful misrepresentation relative thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 5 years, or both. (10 U.S.C. 1001.)</small>																							
	1. NAME AND ADDRESS OF EMPLOYING AGENCY HEALTH BENEFITS OFFICER (EMPLOYEE)		2. DATE RECEIVED BY EMPLOYING OFFICE 3-15-64	3. EFFECTIVE DATE OF ELECTION 3-15-64	5. PAYROLL ACTION (INITIALS AND DATE)																							
PART F TO BE COMPLETED BY AGENCY.	4. PAYROLL OFFICE NO.		5. PAYROLL ACTION (INITIALS AND DATE)																									
	6. NAME OF AUTHORIZED AGENCY OFFICIAL																											
REMARKS FOR USE ONLY BY ENROLLEES AND AGENCY.	1E				5010																							

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE	
TO: Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall	
EMPLOYEE SERIAL NO.	NAME OF EMPLOYEE
	LAST FIRST MIDDLE
1-6	(Prior) 7-24
10032	Woods, James S.
OFFICE/COMPONENT	
25-26	
57	
INSTRUCTIONS	
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.	
PCS DATES OF SERVICE	
TYPE OF DATA	ARRIVAL
	DEPARTURE
	COUNTRY
	OMIT
1 - PCS (Basic)	27 28-29 30-31 32-33 34-35 36-37 38-39
3 - CORRECTION	(03 19 59) Philippines
5 - CANCELLATION	575
TDY DATES OF SERVICE	
TYPE OF DATA	DEPARTURE
	RETURN
	AREA(S)
	OMIT
2 - TDY (Basic)	27 28-29 30-31 32-33 34-35 36-37 38-39
4 - CORRECTION	
6 - CANCELLATION	
SOURCE OF RECORD DOCUMENT	
<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	
DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
REMARKS	
PREPARED BY	REPORT ANNOTATED ON SOURCE DOCUMENT
	ABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
FISCAL DIVISION	SIGNATURE
FINANCE DIVISION	

Form No. 2079
 CHAPTER I-5 F.P.M.
 5 GAO'S 09

HEALTH BENEFITS REGISTRATION FOR 1961

FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959

EMPLOYEE'S CONTROL NO. **082697**

PART A
 ALL WHO REGISTER MUST FILL IN THIS PART.

1. NAME (LAST) (FIRST) (MIDDLE INITIAL) **W. J. ...**
 2. DATE OF BIRTH (The numbers) MONTH DAY YEAR **11 2 5**
 3. Are you now married? YES NO
 4. YOUR MARITAL ADDRESS (NUMBER AND STREET) (CITY AND ZONE NUMBER) (STATE) **...**
 5. SEX MALE FEMALE
 6. Are you covered by, or is any family member listed below covered by or enrolling in, a plan under the Federal Employees Health Benefits Act of 1959 (through the enrollment of another United States or District of Columbia Government employee or annuitant)? YES NO
 7. Place an "X" in proper box to show your annual basic salary range.
 UNDER \$4,000 \$4,000 TO \$5,999 \$6,000 TO \$9,999 \$10,000 OR OVER

PART B
 FILE IN THIS PART IF YOU WISH TO ENROLL IN A HEALTH BENEFITS PLAN.

1. I elect to enroll in a health benefits plan as shown below. I authorize deductions to be made from my salary, compensation, or annuity to cover my share of the cost of the enrollment. (Copy the information requested below from inside cover of brochure of the plan you select.)
 NAME OF PLAN **...** OPTION (HIGH OR LOW) **LOW** ENROLLMENT CODE NUMBER **1 2 5**
 2. In spots below list all eligible family members without exceptions. List your wife or husband first, then your unmarried children under age 19, including legally adopted children, and stepchildren and illegitimate children who live with you in a regular parent-child relationship. Include also any unmarried child over 19 who became disabled before age 19 and who, because of the disability, is incapable of self-support. (Attach a doctor's certificate for a disabled child age 19 or over.)

NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)
Wife or Husband		

3. If you are a female (employee or annuitant)—does the family listed above include a husband who is incapable of self-support by reason of mental or physical disability which can be expected to continue for more than one year? (If answer is "Yes," attach a doctor's certificate.) YES NO

PART C
 FILE IN THIS PART IF YOU WISH NOT TO ENROLL OR IF YOU WISH TO CANCEL YOUR ENROLLMENT.

PLACE AN "X" IN ITEM 1 OR ITEM 2, WHICHEVER APPLIES AND ANSWER ITEM 3.
 1. I elect not to enroll in any plan under the Health Benefits Act.
 2. I elect to cancel my present enrollment under the Health Benefits Act.
 3. The reason for my election is (Place an "X" in proper box):
 (a) I am covered by a plan under the Health Benefits Act through the enrollment of my husband, wife, or parent.
 (b) I am covered by a health insurance plan which is not under the Health Benefits Act.
 (c) Any other reason.

PART D
 FILE IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT.

I elect to change my enrollment as shown by the enrollment number and other information in Part B.
 1. Enrollment code number of present plan. **4 2 2**
 2. Number of event which permits change. (See table on back of duplicate for proper number.) **7**
 3. Date of event which permits change. MONTH DAY YEAR **MAR 31 1961**

PART E
 ALL WHO REGISTER MUST FILL IN THIS PART.

SIGNATURE **...** DATE **17 / 11 / 61**
 WARNING.—Any intentional false statement in this application or willful misrepresentation relative thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 5 years, or both. (18 U.S.C. 1001.)

PART F
 TO BE COMPLETED BY AGENCY.

1. NAME AND ADDRESS OF EMPLOYING OFFICE
 2. DATE RECEIVED IN EMPLOYING OFFICE **3/27/61**
 3. EFFECTIVE DATE OF ELECTION **4/16/61**
 4. PAYROLL OFFICE NO.
 5. PAYROLL ACTION (INITIALS AND DATE)

REMARKS
FE
X-1579
110032

CONFIDENTIAL
(When Filled In)

TRAVEL AGREEMENT BY STAFF EMPLOYEES ASSIGNED TO PERMANENT
DUTY STATION OUTSIDE CONTINENTAL UNITED STATES

1. In accordance with the policy of the Central Intelligence Agency, I agree to serve outside the continental United States a minimum tour of Twenty-four months from the date of my arrival at my permanent post of duty, unless said tour is sooner terminated by the Government for its convenience, or it is terminated by the Agency for circumstances that are considered by it to be beyond my control.

2. It is understood and agreed that if I terminate for reasons within my control in less than 12 months from the date of arrival at said post, I shall reimburse CIA for all travel expenses, including storage and per diem, incurred in the transporting of myself, my dependents, my household and personal effects and my automobile to my permanent post of duty, and shall pay all return travel and transportation expenses to the United States.

3. It is further understood and agreed that if I terminate for reasons within my control subsequent to the twelfth month but prior to the completion of my tour of duty, I shall pay all return expenses for the travel and transportation of myself, my dependents, my household and personal effects and my automobile to the United States.

WITNESS:

Anna L. Phillips
Office of Personnel
Anna L. Phillips

James S. Woods
(Employee)
James S. Woods

Date: 21 Feb. 1961

Standard Form No. 2809
CHAPTER I - U.P.M.
6 (REV. 1-50)

HEALTH BENEFITS REGISTRATION FORM

FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959
(Read instructions on back of last page. Use only upper or lower case letters.)

CAREER'S CONTROL NO.
088550

PART A
ALL WHO REGISTER MUST FILL IN THIS PART.

1. NAME (LAST) (FIRST) (MIDDLE INITIAL)
Woods James S

2. DATE OF BIRTH (Use --- for missing)
MONTH: **2** DAY: **5** YEAR: **28**

3. Are you now married?
YES NO

4. YOUR MARITAL ADDRESS (NUMBER AND STREET) (CITY AND ZONE NUMBER) (STATE)
1400 Woodland Drive, Arlington, VA

5. SEX
MALE FEMALE

6. Are you covered by, or is any family member listed below covered by or enrolling in, a plan under the Federal Employees Health Benefits Act of 1959 (through the enrollment of another United States or District of Columbia Government employee or annuitant)?
YES NO

7. Place an "X" in proper box to show your annual basic salary range.
UNDER \$4,000 \$4,000 TO \$5,999 \$6,000 TO \$9,999 \$10,000 OR OVER

PART B
FILL IN THIS PART IF YOU WISH TO ENROLL IN A HEALTH BENEFITS PLAN.

1. I elect to enroll in a health benefits plan as shown below. I authorize deductions to be made from my salary, compensation, or annuity to cover my share of the cost of the enrollment. (Copy the information requested below from inside cover of brochure of the plan you select.)

NAME OF PLAN General Employees Health Plan	OPTION (HIGH OR LOW) Low	ENROLLMENT CODE NUMBER 4 2 1
------------------------------------------------------	------------------------------------	----------------------------------------

2. In space below list all eligible family members without exception. List your wife or husband first, then your unmarried children under age 19, including legally adopted children, and stepchildren and illegitimate children who live with you in a regular parent-child relationship. Include also any unmarried child over 19 who became disabled before age 19 and who, because of the disability, is incapable of self-support. (Attach a doctor's certificate for a disabled child age 19 or over.)

NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)
Wife or Husband James S. Woods	1928		

3. If you are a female (employee or annuitant)—does the family listed above include a husband who is incapable of self-support by reason of mental or physical disability which can be expected to continue for more than one year? (If answer is "Yes," attach a doctor's certificate.)
YES NO

PART C
FILL IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT.

PLACE AN "X" IN ITEM 1 OR ITEM 2, WHICHEVER APPLIES; AND ANSWER ITEM 3.

1. I elect not to enroll in any plan under the Health Benefits Act.

2. I elect to cancel my present enrollment under the Health Benefits Act.

3. The reason for my election is (Place an "X" in proper box):
(a) I am covered by a plan under the Health Benefits Act through the enrollment of my husband, wife, or parent. (1)
(b) I am covered by a health insurance plan which is not under the Health Benefits Act. (2)
(c) Any other reason. (3)

PART D
FILL IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT.

I elect to change my enrollment as shown by the enrollment number and other information in Part B.

1. Enrollment code number of present plan: **4 2 1**

2. Number of event which permits change (See table on back of booklet for proper number): **2**

3. Date of event which permits change:
MONTH: **APR** DAY: **6** YEAR: **1960**

PART E
ALL WHO REGISTER MUST FILL IN THIS PART.

WARNING.— Any intentional false statement in this application or willful misrepresentation relative thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 3 years, or both. (18 U.S.C. 1001.)

PART F
TO BE COMPLETED BY AGENCY.

1. NAME AND ADDRESS OF EMPLOYING OFFICE
J. L. Beckoff
HEALTH BENEFITS OFFICER

2. DATE RECEIVED BY EMPLOYING OFFICE
8/11/60

3. EFFECTIVE DATE OF ELECTION
1/1/60

4. PAYROLL OFFICE NO.

5. PAYROLL ACTION (INITIALS AND DATE)

REMARKS
FOR USE ONLY BY AGENCIES AND AGENCIES.

116032

Standard Form No. 2800
CHAPTER I-3-F.P.M.
6 (REV. 1-5-59)

HEALTH BENEFITS REGISTRATION FORM
FEDERAL EMPLOYERS HEALTH BENEFITS ACT OF 1959

CARRIER'S CONTRACT NO.
3362
053076

PART A
ALL WHO REGISTER MUST FILL IN THIS PART.

1. NAME (LAST) (FIRST) (MIDDLE INITIAL)
WOODS JAMES S

2. DATE OF BIRTH (Give month, day, year)
MONTH: 2 DAY: 20 YEAR: 28

3. Are you now married?
YES NO

4. YOUR MARITAL ADDRESS (NUMBER AND STREET) (CITY AND ZONE NUMBER) (STATE)
FOREST RIVER NORTH DAKOTA

5. SEX
MALE FEMALE

6. Are you covered by, or is any family member listed below covered by, or enrolling in, a plan under the Federal Employees Health Benefits Act of 1959 (through the enrollment of another United States or District of Columbia Government employee or annuitant)?
YES NO

7. Place an "X" in proper box to show your annual basic salary range.
UNDER \$4,000 \$4,000 TO \$5,999 \$6,000 TO \$9,999 \$10,000 OR OVER

PART B
FILL IN THIS PART IF YOU WISH TO ENROLL IN A HEALTH BENEFITS PLAN.

1. I elect to enroll in a health benefits plan as shown below. I authorize deductions to be made from my salary, compensation, or annuity to cover my share of the cost of the enrollment. (Copy the information requested below from inside cover of brochure of the plan you select.)

NAME OF PLAN ASSOCIATION BENEFIT PLAN	OPTION (HIGH OR LOW) HIGH	ENROLLMENT COST (PER YEAR)
		4 2 1

2. In space below list all eligible family members without exception. List your wife or husband first, then your unmarried children under age 19, including legally adopted children, and stepchildren and legitimate children who live with you in a regular parent-child relationship. Include also any unmarried child over 19 who became disabled before age 19 and who, because of the disability, is incapable of self-support. (Attach a doctor's certificate for a disabled child age 19 or over.)

NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	NAMES OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)
Wife or Husband	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

3. If you are a female (employee or annuitant)—does the family listed above include a husband who is incapable of self-support by reason of mental or physical disability which can be expected to continue for more than one year? (If answer is "Yes," attach a doctor's certificate.)
YES NO

PART C
FILL IN THIS PART IF YOU WISH NOT TO ENROLL OR IF YOU WISH TO CANCEL YOUR ENROLLMENT.

1. I elect not to enroll in any plan under the Health Benefits Act.

2. I elect to cancel my present enrollment under the Health Benefits Act.

3. The reason for my election is (Place an "X" in proper box):
(a) I am covered by a plan under the Health Benefits Act through the enrollment of my husband, wife, or parent.

(b) I am covered by a health insurance plan which is not under the Health Benefits Act.

(c) Any other reason.

PART D
FILL IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT.

1. I elect to change my enrollment as shown by the enrollment number and other information in Part B.

1. Enrollment cost number of present plan.

2. Number of event which permits change. (See table on back of duplicate for proper number)

3. Date of event which permits change (See table on back of duplicate for proper number)

MONTH	DAY	YEAR
-------	-----	------

PART E
ALL WHO REGISTER MUST FILL IN THIS PART

WARNING.— Any intentional false statement in this application or willful misrepresentation relative thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 3 years, or both. (18 U.S.C. 1003)

James S Woods 14 June 60

PART F
TO BE COMPLETED BY AGENCY.

1. NAME AND ADDRESS OF EMPLOYING OFFICE

2. DATE RECEIVED IN EMPLOYING OFFICE
6/30/60

3. EFFECTIVE DATE OF ELECTION
7/1/60

4. FEDERAL OFFICE NO.

5. PAYROLL AGENCY (INITIALS AND DATE)

REMARKS
FOR USE ONLY BY ANNUITANTS AND AGENCY.
FE

10564

CONFIDENTIAL
(When Filled In)

TRAVEL AGREEMENT BY STAFF EMPLOYEES ASSIGNED TO PERMANENT
DUTY STATION OUTSIDE CONTINENTAL UNITED STATES

1. In accordance with the policy of the Central Intelligence Agency, I agree to serve outside the continental United States a minimum tour of 24 months from the date of my arrival at my permanent post of duty, unless said tour is sooner terminated by the Government for its convenience, or it is terminated by the Agency for circumstances that are considered by it to be beyond my control.

2. It is understood and agreed that if I terminate for reasons within my control in less than 12 months from the date of arrival at said post, I shall reimburse CIA for all travel expenses, including storage and per diem, incurred in the transporting of myself, my dependents, my household and personal effects and my automobile to my permanent post of duty, and shall pay all return travel and transportation expenses to the United States.

3. It is further understood and agreed that if I terminate for reasons within my control subsequent to the twelfth month but prior to the completion of my tour of duty, I shall pay all return expenses for the travel and transportation of myself, my dependents, my household and personal effects and my automobile to the United States.

WITNESS:

Lorena E. Horbeck
Office of Personnel

Lorena E. Horbeck

James S. Woods
(Employee)
James S. Woods

Date: 23 Aug 57

CONFIDENTIAL

29 November 1956

JAMES S. Woods

Korea Station wishes to express its appreciation to _____ for his most diligent performance of duty during his recent TDY here, his highly cooperative attitude and above all, his extreme eagerness to get a job done well and expeditiously.

It was largely with his help that Korea Station was able to screen and process the voluminous material which needed to be handled in order to establish a coordinated and integrated record and file maintenance system.

All Korea Station personnel connected with the work of the TSI Team members were impressed and gratified by the eagerness with which they assisted with details and helped with problems that were outside the responsibilities of their assigned task. Their pleasant manner, apt suggestions, their excellent cooperation and untiring efforts to complete more than the initially estimated workload, all created a most favorable impression which reflects such credit not only on the team members themselves but on the Records Integration Branch as well.

Leland H. Carls

Leland H. CARLS
Chief, ROSTA (Rear)

CONFIDENTIAL

144 Cecil Hall -
Wash. Branch
10-3

CONFIDENTIAL
(When Filled In)

1. NAME (Last) <i>Woods</i> (First) <i>JAMES</i> (Middle) <i>S.</i>			2. THIS DATE <i>6 August 1952</i>		
3. THE FOLLOWING AGENCY SPONSORED INSURANCE PROGRAMS HAVE BEEN EXPLAINED TO ME					
<input checked="" type="checkbox"/> WAR AGENCIES EMPLOYEES PROTECTIVE ASSOCIATION (WAEPA)		<input checked="" type="checkbox"/> SICK DISEASES *			
<input checked="" type="checkbox"/> GROUP HOSPITALIZATION INCORPORATED (GHI)		<input checked="" type="checkbox"/> INCOME REPLACEMENT *			
<input checked="" type="checkbox"/> MUTUAL BENEFIT OF ORANS - HOSPITALIZATION		* CASH PAYMENT OF PREMIUMS AT THE TIME EMPLOYEE APPLIES FOR INSURANCE MUST COVER THE PERIOD OF TIME HE WILL BE AWAY FROM HEADQUARTERS.			
<input checked="" type="checkbox"/> UNITED LIFE INSURANCE (UBLIC)					
<input checked="" type="checkbox"/> AIR TRIP INSURANCE					
4. ITINERARY (To be completed only for individuals making application for Air Trip Insurance)					
<i>WDC - Tokyo - WASH - TDY</i>					
5. I AM NOW PARTICIPATING, OR WOULD LIKE TO PARTICIPATE IN THE INSURANCE PROGRAMS LISTED BELOW.				SIGNATURE OF EMPLOYEE	
				<i>James S Woods</i>	
TYPE OF POLICY	DESIRED	NOB HAVE	POLICY NUMBER	DEDUCTIONS AUTHORIZED EACH PAY PERIOD	CASH PAID
<i>AIR TRIP FLIGHT</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<i>2017</i>	<i>---</i>	<i>4.00</i>
6. I DO NOT ELECT TO PARTICIPATE IN ANY OF THE STATED INSURANCE PROGRAMS				SIGNATURE OF EMPLOYEE	
7. EMPLOYEE INTERVIEWED BY	CPD (Signature) <i>Patterson</i>			ICD (Signature) <i>Esther Patterson</i>	
8. REMARKS					
When completed, the original of this form should be forwarded to T&RB for incorporation in the employee's official personnel folder. The copy should be forwarded to CPD for retention in CPD files.					

INSURANCE QUESTIONNAIRE

CENTRAL INTELLIGENCE AGENCY

2430 E STREET NW.

WASHINGTON 25, D. C.

Date 23 July 1954

Dear James S. Woods

1. This is to notify you that the United States Government, as represented by the Central Intelligence Agency, has accepted your employment effective 25 April 1954.

Position: I.O.

Base Salary: GS-5 \$3535.00

2. You will be:

a. Entitled to annual and sick leave in accordance with Civil Service Commission rules and regulations, or such other provisions of law or regulations as may be established in lieu thereof.

b. Reimbursed for travel expenses in accordance with CIA Regulations or Standardized Government Travel Regulations, as amended.

c. If stationed outside continental United States, granted such monetary allowances as are prescribed by CIA Regulations.

3. As a condition of your employment by the Central Intelligence Agency, you are subject to assignment to tours of duty at posts outside the continental United States. Each time you are so assigned, unless otherwise specified in advance by CIA, you will be required to remain at the post to which assigned for a period of 24 months from the date of arrival thereat, unless sooner transferred, reassigned or separated for reasons beyond your control. If you wish to return to the United States for personal reasons during that period, all travel and transportation costs incident to such return will be borne by you, with no expense to the Government.

4. If this employment is for assignment to an overseas post, it is understood and agreed that, unless earlier separated for reasons beyond your control, you will remain in Government service for 12 months after your arrival at your first overseas post, and if you violate this agreement, any money expended by the United States on account of your travel and the transportation of your immediate family and household goods will be considered a debt due to the United States.

5. Employment is conditioned upon satisfactory completion of the training courses prescribed by CIA and satisfactory performance of duty for a total period of six months from date of employment. In the event

either training or performance of duty is deemed unsatisfactory by CIA, you will be offered other types of employment, if available, or your employment will be terminated.

6. Your appointment is for such time as your services may be required and funds are available for the work of CIA. Notice of termination will be given you by procedure similar to that provided by Civil Service rules and regulations.



Official authorized to sign letters of appointment.

I accept the above agreement as a condition of my employment by CIA.

James S. Hoade
Employee

23 July 54
Date

2200

FE-1

Wing E 15th Flt
No 10

INSURANCE QUESTIONNAIRE

Page 1

1. NAME (Last) Woods (First) James (Middle) R 2. THIS DATE 10 June 54

3. THE FOLLOWING AGENCY SPONSORED INSURANCE PROGRAMS HAVE BEEN EXPLAINED TO ME:
 WAR AGENCIES EMPLOYEES PROTECTIVE ASSOCIATION (WARPA) MUTUAL BENEFIT OF OMAHA
 NI GROUP HOSPITALIZATION INCORPORATED AIR TRIP INSURANCE

4. ITINERARY (To be completed only for individuals making application for Air Trip Insurance):
Lvg Wash. 2 July 54 To Minneapolis, Seattle, & Tokyo

5. I AM NOW PARTICIPATING, OR WOULD LIKE TO PARTICIPATE IN THE FOLLOWING INSURANCE PROGRAMS:

TYPE OF POLICY	DESIRED	NOW HAVE	POLICY NUMBER	DEDUCTIONS AUTHORIZED EACH PAY PERIOD	CASH PAID
W.A.E.R.A.	<input checked="" type="checkbox"/>		#2574	P/R - \$8.33-9/11/54	\$ 27.25
Air Trip Ins	<input checked="" type="checkbox"/>		28354		\$ 4.00

James R Woods
SIGNATURE

6. I DO NOT ELECT TO PARTICIPATE IN ANY OF THE STATED INSURANCE PROGRAMS:

 SIGNATURE

7. EMPLOYEE INTERVIEWED BY:
 CPB: Co Jeter SIGNATURE IACB: Casa S. Hall SIGNATURE

8. REMARKS:

When completed, the original of this form should be forwarded to T&RD for incorporation in the employee's official personnel folder. The copy should be forwarded to CPB for retention in CPB files.

APPOINTMENT AFFIDAVITS

IMPORTANT.—Before swearing to these appointment affidavits, you should read and understand the attached information for appointees

C. I. A.

Washington, D. C.

(Department or agency)

(Bureau or division)

(Place of employment)

I, James S. Woods, do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, **SO HELP ME GOD.**

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

April 21, 1952
(Date of entrance on duty)

James S. Woods
(Signature of appointee)

Subscribed and sworn before me this 21st day of April, A. D. 1952,

at Washington D. C.
(City) (State)

[SEAL]

Margaret C. Casey
(Signature of officer)
S. U. S. C. 16 & 16 A
(Title)

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (street and number, city and State)
3505 Mission Ave. S.E. Washington 19, D.C.

2. (A) DATE OF BIRTH Feb. 20, 1928 (B) PLACE OF BIRTH (city or town and State or country) Forest River, N. Dak.

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY Mr. Ross a Stoad (B) RELATIONSHIP Father (C) STREET AND NUMBER, CITY AND STATE Forest River, N. Dak. (D) TELEPHONE NO. -

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 12 MONTHS? YES NO

If so, for each such relative fill in the blanks below. If additional space is necessary, complete under Item 10.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MARRIED (Check one)	SINGLE
<u>Miss Marilyn Stoad</u>	<u>3143 W 18th St. Denver, Col.</u>	<u>clerk</u> <u>Temporary</u> <u>V. P.</u>	<u>sister</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	ITEM NO.	10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY
1. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? If your answer is "Yes", give details in Item 10.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional discharge, or by reason of voluntary or involuntary separation after 5 years' service; amount of retirement pay, and under what retirement act; and rating, if retired from military or naval service.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
8. SINCE YOU FILED APPLICATION FOR THIS APPOINTMENT HAVE YOU BEEN DISCHARGED, OR FORGOTTEN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY EMPLOYER? If your answer is "Yes", give in Item 10 the name and address of employer, date and space in each case.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
9. HAVE YOU EVER BEEN ARRESTED (NOT INCLUDING TRAFFIC VIOLATIONS FOR WHICH YOU WERE FINED \$5 OR LESS OR FORFEITED COLLATERAL OF \$5 OR LESS) SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT? If your answer is "Yes", list all such cases under Item 10. Give in each case: (1) The date; (2) the nature of the offense or violation; (3) the name and function of the court; (4) the penalty imposed, if any; or other disposition of the case. If appointed, your fingerprints will be taken.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before issuing the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in accordance with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointments.

This form should be checked by reading of office, pension, suitability in connection with any record of crimes, delinquency or arrest, and particularly for the following:

- Identity of appointee** - It is the duty of the appointing officer to guard against impersonation and to determine beyond reasonable doubt that the appointee is the same person whose appointment was authorized. The appointee's signature and handwriting are to be compared with the application and other pertinent papers. If the appointee is qualified in a written examination, the signature on this form should be compared with the signature on the notification sheet, which was signed in the examination room. If physical examinations may be required against the medical certificate, the appointing officer should be questioned as to his personal history for agreement with his previous statements.
- Age** - If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Until such determination is made, the appointment may not be consummated.
- Citizenship** - The appointing officer is responsible for observing the citizenship provisions of (1) the Civil Service Rules 4-2 (1) appropriate to the position or (2) applicable laws for both persons and acceptable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointment should not be consummated until clearance has been secured from the certifying office of the Civil Service Commission.
- Members of Family** - Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under permanent or permanent appointment in the executive service, no other member of such family is eligible for permanent or permanent appointment in the executive service. The appointments of persons entitled to veteran preference are not subject to this requirement. The members of family provision does not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.

STATEMENT OF FEDERAL CIVILIAN AND MILITARY SERVICE

NAME (LAST) (FIRST) (MIDDLE) BRANCH SECTION
 Woods JAMES SHAYIE *Personnel & Records* *File*

I FEDERAL CIVILIAN SERVICE (BEGIN WITH THIS AGENCY AND FOLLOW IN ORDER OF CHRONOLOGICAL ORDER)

AGENCY	LOCATION	FROM			TO			TOTAL SERVICE		
		DA.	MO.	YR.	DA.	MO.	YR.	DA.	MO.	YR.
C.I.A.	April 27, 1955	21	4	1952				M	8	
Treasury Dept	15th & Penn	7	11	1951	19	4	1952	10	5	-
Treasury Dept.	15th & Penn	19	5	1950	19	9	1950	1	17	
<p>SEP 11/12/48 verified 10/23/57 JLR</p>										
Total Civilian Service								10	9	-

II MILITARY SERVICE (INCLUDE ONLY PERIODS OF ACTIVE DUTY; DO NOT INCLUDE TERMINAL LEAVE)

BRANCH OF SERVICE	FROM			TO			TOTAL SERVICE			
	DA.	MO.	YR.	DA.	MO.	YR.	DA.	MO.	YR.	
Army	3	10	1946	12	4	1948	10	8	1	
Army	19	10	1950	7	8	1951	15	7		
Total Military Service								20	15	2

III CERTIFICATION

I swear (or affirm) that the above Civilian and Military service is complete and accurate to the best of my knowledge:

April 21, 1952 DATE James S. Woods SIGNATURE OF EMPLOYEE

IV REMARKS: (CONCERNING ABOVE SERVICE)

Margaret C. Hickey
505C/6016-2
SEP 12-8-48

V FOR PERSONNEL OFFICE USE ONLY

TOTAL CREDITABLE SERVICE

DAYS	MONTHS	YEARS
25	1	3

as of 21 April 1952

MAY BE CONTINUED ON NON-NEGOTIABLE REPRODUCTION

~~SECRET~~ SECURITY INFORMATION
PERSONNEL QUALIFICATION QUESTIONNAIRE

1. Serial No. (no entry)	2. NAME: (last) (first) (middle) WOODS JAMES SAUVIE	3. Office RI/FI
4. Date of Birth: Feb. 20, 1928	5. Sex: <input checked="" type="checkbox"/> male (1) <input type="checkbox"/> female (2) Marital Status: single Nr. Dependents: 0	6. Employment Date: April 1952
7. Citizenship: <input checked="" type="checkbox"/> U.S. <input type="checkbox"/> Other	8. Acquired By: (1) <input checked="" type="checkbox"/> Birth (2) <input type="checkbox"/> Marriage (3) <input type="checkbox"/> Naturalization (4) <input type="checkbox"/> Other (specify) Year U.S. citizenship acquired, if not by birth	

SEC. I. EDUCATION

1. Extent: (circle one)
- | | | |
|--------------------------------------------------|----------------------------------------------------------------|-------------------|
| 1. Less than high school graduate | <input checked="" type="radio"/> 4. Two years college, or less | 8. Masters degree |
| 2. High school graduate | 5. Over two years, no degree | 9. Doctors degree |
| 3. Trade, Business or Commercial school graduate | 6. Bachelor degree | |
| | 7. Post-graduate study (minimum 8 sem. hrs.) | |

2. College or University Study:

Name and location of College or University	Major	Minor	Dates att'd		Yrs Compl		Degree Recd		Sem Hrs
			From	To	Day	Night	Title	Date	
Wakers Business School - Grand Forks N. Dakota	accounting	law	Oct 48	Feb 50			Junior	Accounting	Diploma
Strayer College - Washington D.C.	accounting	law	Now attending						

3. Trade, Commercial, and Specialized Training:

School	Attendance Dates			Study or Specialization
	From	To	Tot. mo's	

4. Military, Intelligence or Investigative training (full time duty as a student in specialized schools such as intelligence, communications, ordnance disposal, etc.)

School	Attendance Dates			Study or Specialization
	From	To	Tot. mo's	

SECRET

SEC. II. WORK EXPERIENCE

1. State the nature of duties performed with this organization, starting with your present position. Approximate dates (month and year) are sufficient. Use a continuation sheet, if necessary, to adequately describe your duties.

From <u>April 1952</u> To <u>Nov 54</u> Tot. mos. <u>7</u>	Description of Duties:
Grade <u>GS-4</u> Salary <u>3175</u> yr	<u>Supervise the changing of the folders from folders to single documents.</u>
Office <u>RI/FI</u>	<u>Automated documents for PA</u>
Position Title: <u>CLERK</u>	<u>Do requests and other general office duties.</u>
Duty Title: <u>General Office Work</u>	Duty Station, if overseas:
From _____ To _____ Tot. mos. _____	Description of Duties: _____
Grade _____ Salary _____	
Office _____	
Position Title: _____	
Duty Title: _____	Duty Station, if overseas: _____
From _____ To _____ Tot. mos. _____	Description of Duties: _____
Grade _____ Salary _____	
Office _____	
Position Title: _____	
Duty Title: _____	Duty Station, if overseas: _____
From _____ To _____ Tot. mos. _____	Description of Duties: _____
Grade _____ Salary _____	
Office _____	
Position Title: _____	
Duty Title: _____	Duty Station, if overseas: _____

SEC. II. WORK EXPERIENCE (CONT'D.)

2. Previous Employment: Describe your previous work experience in sufficient detail to permit full recognition of your qualifications. Include military work experience. List last position first.

From <u>Nov 2</u> To <u>Jan 5</u> Tot. mo's <u>4</u> Classification Grade (if in Federal Service) <u>GS-3</u> Salary <u>2950</u> Number and Class of Employees Supervised: Employer <u>Treasury Dept.</u> Kind of Business or organization (i. e., paper products mfr, public utility) <u>Div. of Investments</u>	Exact Title of your position <u>Fiscal Accounting Clerk</u> Description of Duties: <u>Working with Mexican Claims</u>
From <u>May 20</u> To <u>Jan 5</u> Tot. mo's <u>7</u> Classification Grade (if in Federal Service) <u>GS-2</u> Salary <u>2150</u> Number and Class of Employees Supervised: Employer <u>Treasury Dept.</u> Kind of Business or organization (i. e., paper products mfr, public utility) <u>Div. of Investments</u>	Exact Title of your position <u>Fiscal Accounting Clerk</u> Description of Duties: <u>verified checks for correct names, addresses and money.</u> Other (3 months of this period spent in the Army) Duty Station if overseas:
From _____ To _____ Tot. mo's _____ Classification Grade (if in Federal Service) _____ Salary _____ Number and Class of Employees Supervised: Employer _____ Kind of Business or organization (i. e., paper products mfr, public utility) _____	Exact Title of your position _____ Description of Duties: _____ Duty Station if overseas: _____
From _____ To _____ Tot. mo's _____ Classification Grade (if in Federal Service) _____ Salary _____ Number and Class of Employees Supervised: Employer _____ Kind of Business or organization (i. e., paper products mfr, public utility) _____	Exact Title of your position _____ Description of Duties: _____ Duty Station if overseas: _____
From _____ To _____ Tot. mo's _____ Classification Grade (if in Federal Service) _____ Salary _____ Number and Class of Employees Supervised: Employer _____ Kind of Business or organization (i. e., paper products mfr, public utility) _____	Exact Title of your position _____ Description of Duties: _____ Duty Station if overseas: _____

SEC. II. WORK EXPERIENCE (CONT'D)

3. Special Work Experience: Check any of the following organizations by which you may have been employed.

- | | |
|----------------------------------------------------------|----------------------------------------------------------|
| 01 <input type="checkbox"/> U. S. Secret Service | 24 <input type="checkbox"/> Air Force A-2 |
| 02 <input type="checkbox"/> Civil Police | 25 <input type="checkbox"/> Foreign Economic Admin. |
| 03 <input type="checkbox"/> Military Police | 26 <input type="checkbox"/> Counter Intelligence Corps |
| 04 <input type="checkbox"/> U. S. Border Patrol | 27 <input type="checkbox"/> Immigration & Naturalization |
| 05 <input type="checkbox"/> U. S. Narcotics Squad | 28 <input type="checkbox"/> Strategic Services Unit |
| 06 <input type="checkbox"/> FBI | 29 <input type="checkbox"/> Foreign Service, State Dept. |
| 07 <input type="checkbox"/> Criminal Investigation Div. | 30 <input type="checkbox"/> Central Intelligence Group |
| 21 <input type="checkbox"/> Office of Naval Intelligence | 31 <input type="checkbox"/> Armed Forces Security Agency |
| 22 <input type="checkbox"/> Office of War Information | 32 <input type="checkbox"/> Coordinator of Information |
| 23 <input type="checkbox"/> Army G-2 | 33 <input type="checkbox"/> Office of Facts & Figures |
| 20 <input type="checkbox"/> Office of Strategic Services | 34 <input type="checkbox"/> Board of Economic Warfare |
| | 35 <input type="checkbox"/> Federal Communications Comm. |

SEC. III. FOREIGN LANGUAGES

List below the foreign languages in which you have some competence. Be sure to include uncommon modern languages. Check (X) your competence and how acquired.

LANGUAGE	COMPETENCE						HOW ACQUIRED				
	Equivalent to Native Fluency *	Fluent but obviously Foreign *	Adequate for Research **	Adequate for Travel	Limited Knowledge		Native of Country	Prolonged Residence	Contact (Parents, etc.)	Academic Study	

* If you have checked 'Fluent' for a language that has significant difference in spoken and written form (e.g., Arabic), explain your competence herein _____

**Specialized Language Competence: Describe ability to do specialized language work involving vocabularies and terminology in the scientific, engineering, telecommunications, and military fields. List the language with the type of speciality. _____

SEC. IV. AREA KNOWLEDGE

1. List below any foreign countries or regions of which you have knowledge gained as a result of residence, travel or study. Study can mean either academic study, or study of a foreign country resulting from an intelligence, military, commercial or professional work assignment.

Country or Region	Dates of Residence, Study Etc.	Manner in Which Knowledge Was Acquired (check (X) one)		
		Residence	Travel	Study
Tokyo, Japan				
Tokyo, Japan	Jan 47 - March 48	X (Army)		
Korea	Dec 50 - June 51	X (Army)		

2. Specialized Knowledge of Area

- List specialized knowledge of foreign country such as knowledge of terrain, coasts and harbors, utilities, railroads, industries, political parties, etc., gained as a result of study or work assignment. Include name of employer or organization.

Country	Type of Knowledge	How and When Gained

SEC. V. TYPING AND STENOGRAPHIC SKILLS (PRESENT UTILIZATION)

Skill	Per Cent of Time Used	Not Used	WPM (Approximate Proficiency)	Prefer Assignment Using Skill Oftener
Typing	1. 54%	2.	35	1. Yes 2. No
Shorthand	1.	2. ✓		1. Yes 2. No

Shorthand System: 1. Manual 2. Machine 3. Speedwriting.

SEC. VI. LICENSES, HOBBIES, SPECIAL QUALIFICATIONS

1. Licenses: List any licenses or certification such as teachers, pilot, marine, etc. _____	2. Hobbies: List any hobbies such as sailing, skiing, writing, or other special qualifications. _____

SEC. VII. PROFESSIONAL AND ACADEMIC HONORS

List any professional or academic associations or honorary societies in which you hold membership. _____

SEC. VIII. PUBLICATIONS

List below the type of writing (non-fiction: professional or scientific articles, general interest subjects, current events, etc; fiction: novels, short stories, etc.) of any published materials of which you were author or co-author.

SEC. IX. INVENTIONS

Describe any devices you have invented as to type of work for which intended and whether patented.

Device	Patented			
	(1)	Yes	(2)	No
	(1)	Yes	(2)	No
	(1)	Yes	(2)	No
	(1)	Yes	(2)	No

SEC. X. TESTS (Within present organization)

Describe below the type of tests which you have taken.

Type of Test	Date Taken

SEC. XI. PHYSICAL HANDICAPS

List any physical handicaps you may have.

<i>None</i>

SEC. XII. OVERSEAS ASSIGNMENT

Are you willing to accept periodic tour of duty overseas?

(1) 2 year Tour <input checked="" type="checkbox"/>	(2) 4 year Tour <input type="checkbox"/>	(3) Not interested <input type="checkbox"/>
-----------------------------------------------------	------------------------------------------	---------------------------------------------

SEC. XIII. WORK ASSIGNMENT

In view of your total experience and education, for what assignment do you think you are best qualified?

<i>One in which I may be able to use my accumulating experience, such as in finance work or administrative work.</i>

SEC. XIV. MILITARY STATUS

1. Present Draft Status
 Have you registered under the Selective Service Act of 1948? Yes No.
 If yes, indicate your present draft classification 4 F

2. Present Reserve or National Guard Status
 Do you now have Reserve or National Guard Status Yes No.
 If yes, complete the following.

1. National Guard
2. Air National Guard
3. Active Reserve Status (member of organized unit)
4. Inactive Reserve Status

Service ARMY Grade P.F.C Serial Number ER17214704

Reserve Unit with which currently affiliated _____

Service Mobilization Assignment, if any _____

Location of Service Records, if known Washington 25, D.C.

SEC. XV. TRAINING

List the training courses or subjects you have taken in this organization.

Course or Subject	(from) Dates (to)	Hours

SEC. XVI. REMARKS

Use this space to indicate any other qualifications you may have which you do not describe above.

DATE Nov. 13, 1952

SIGNATURE James S. ...

WEAR

REPORT OF QUALIFICATIONS

NOTE: THIS REPORT MUST NOT BE DISCUSSED WITH APPLICANT OR EMPLOYEE.

NAME OF EMPLOYEE (OR APPLICANT)

WOODS, James S.

Acct Clk.

THIS DATE

20 December 1951

TEST RECORD

NOTE: PRINTED BLACK LINE REPRESENTS MEAN PERCENTILE RANKINGS OF GS-4'S. COLORED LINE REPRESENTS PERCENTILE RANKINGS FOR THIS PARTICULAR SUBJECT.

					PROFILE																		
					T	L	1	2	3	4	A	6	7	8	9	M							
					DIRECTIONS																		
					CLERICAL																		
					SPELLING																		
					SENTENCES																		
					NUM. ABIL.																		
					ABST. REAS.																		
					SPACE REL.																		
					VERB. REAS.																		
TYPING		SHORTHAND																					
GROSS NET ERRORS	1	2	3	TOT. TIME																			
28 18 10																							

EVALUATION OF EDUCATION AND EXPERIENCE

TYPE OF POSITION	OUTSTANDING	SUPERIOR	ADEQUATE	WEAK	INADEQUATE
EDUCATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIRECT EXPERIENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INDIRECT EXPERIENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EDUCATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIRECT EXPERIENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INDIRECT EXPERIENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EDUCATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIRECT EXPERIENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INDIRECT EXPERIENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

QUALIFICATIONS TECHNICIAN

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST							
2. NAME (Last, First, Middle) Woods, James S.		25 August 1976							
3. POSITION TITLE Records Admin Officer		4. GRADE GS-12							
5. OFFICE, DIVISION, BRANCH DDO/ACS/ASD		6. EMPLOYEE'S EXT. 6352							
7. PURPOSE OF EVALUATION									
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> HQGS/TDY							
<input type="checkbox"/> ENTRANCE ON DUTY		<input type="checkbox"/> OVERSEAS ASSIGNMENT							
<input type="checkbox"/> TDY STANDBY		<table border="1"><tr><td>ETD</td></tr><tr><td>STATION</td></tr><tr><td>TDY OR PCS</td></tr><tr><td>TYPE OF COVER</td></tr><tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr><tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</td></tr></table>		ETD	STATION	TDY OR PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED
ETD									
STATION									
TDY OR PCS									
TYPE OF COVER									
NO. OF DEPENDENTS TO ACCOMPANY									
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED									
<input type="checkbox"/> SPECIAL TRAINING									
<input checked="" type="checkbox"/> ANNUAL <i>Feb 6</i>									
<input type="checkbox"/> RETURN TO DUTY									
<input type="checkbox"/> FITNESS FOR DUTY									
<input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> RETURN FROM OVERSEAS							
<input type="checkbox"/> YES		8. REQUESTING OFFICER							
		SIGNATURE <i>Donald E. McNeill</i>							
<input type="checkbox"/> NO		ROOM NO. & BUILDING 6311							

10. COMMENTS	
11. REPORT OF EVALUATION Annual Exam Completed.	
DATE 4 October 1976	SIGNATURE FOR CHIEF OF MEDICAL STAFF William T. Colder, OMS/PEO

SECRET

1. NAME (Last, First, Middle) WOODS, James S.		2. DATE OF BIRTH 20 February 1928		3. GRADE GS-10	
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/EUR		5. PRESENT POSITION Records Admin Officer a/o7152		6. EMPLOYEE EXTENSION	
7. PROPOSED STATION Rome, Italy		8. PROPOSED POSITION (Title, Number, Grade) Records Admin Officer 0699 (09)			
9. TYPE OF COVER AT NEW STATION SS# 502-16-6806 Nominal (Light State)		10. ESTIMATED DATE OF DEPARTURE 31 May 1971		11. NO. OF DEPENDENTS TO ACCOMPANY -2-	
12. COMMENTS Please evaluate for proposed assignment. No language is required for this position Form 58 attached					
13. DATE OF REQUEST 8 March 1971		14. SIGNATURE OF REQUESTING OFFICIAL <i>Floyd G. Lanter</i> Floyd G. Lanter, E/Pers		15. ROOM NUMBER AND BUILDING 4B0002 Hq.	
16. EXTENSION 7152					
17. OFFICE OF MEDICAL SERVICES DISPOSITION					
18. OFFICE OF SECURITY DISPOSITION					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION QUALIFIED FOR OVERSEAS ASSIGNMENT					
REQUEST FOR PCS OVERSEAS EVALUATION					

SECRET
(When Filled In)

QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING, TYPE OR PRINT, AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose.

Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not.

Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I BIOGRAPHIC AND POSITION DATA

EMP. SER. NO. 10032	NAME (Last-First-Middle) WOODS JAMES SAUVIE	DATE OF BIRTH 20 FEB 28	SD
------------------------	------------------------------------------------	----------------------------	----

SECTION II EDUCATION

HIGH SCHOOL			
LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Country)	YEARS ATTENDED (From-To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO

COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/ QTR. HRS. (Specify)
	MAJOR	MINOR				
1. UNIVERSITY OF MARYLAND			1964-1970			28 SEM HRS
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1.				
2.				

SECTION III MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:				
2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)				
3. DATE OF BIRTH	4. PLACE OF BIRTH (City, State, Country)			
5. OCCUPATION	6. PRESENT EMPLOYER			
7. CITIZENSHIP	8. FORMER CITIZENSHIP(S) COUNTRY(IES)	9. DATE U.S. CITIZENSHIP ACQUIRED		

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

	NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1. <input checked="" type="checkbox"/> ADD <input type="checkbox"/> DELETE		DAUGHTER	BETHESDA, MD.	AMERICAN	ROCKVILLE, MD 432 COLLEGE PKWY
2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE					

SECRET
(When Filled In)

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY - CHECK (X)			
				TEST-ORANCE	TRAVEL	STUDY	OTHER ASSIGNMENT
		MAR 11 1952	HA 77				
		MAR 11 1952	HA 77				
SECTION VI TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (PPM)		2. SHORTHAND (WPM)		3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM			
				<input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIFY:			
SECTION VII SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.							
SECTION VIII MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?				2. NEW CLASSIFICATION			
<input type="checkbox"/> YES <input type="checkbox"/> NO							
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4. IF DEFERRED, GIVE REASON			
MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG		<input type="checkbox"/> ARMY <input type="checkbox"/> NAVY		<input type="checkbox"/> MARINE CORPS <input type="checkbox"/> AIR FORCE		<input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> AIR NATIONAL GUARD	
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK		3. EXPIRATION DATE OF CURRENT OBLIGATION			
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY (RESERVE) <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED							
5. MILITARY MOBILIZATION ASSIGNMENT				6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED			
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		DATE COMPLETED		RESIDENT	
						AGENCY-SPONSORED	
SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)				DATE OF MEMBERSHIP	
						FROM TO	
1.							
2.							
3.							
SECTION X REMARKS							
DATE		SIGNATURE OF EMPLOYEE					
		X James Laurie Woods					

SECRET

SECRET

(When Filled In)

OFFICIAL USE ONLY (When Filled In)

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS.

SECTION I BIOGRAPHIC AND POSITION DATA

1. EMP. SER. NO. 030032	2. NAME (Last, First, Middle) WOODS, JAMES S.	3. SEX M	4. DATE OF BIRTH 02/20/28	5. SCHEDULE/GRADE/STEP GS-09-07
6. SD D	7. POSITION TITLE RECORDS ADMIN CF	8. OFFICE OF ASSIGNMENT PE	9. LOCATION (Country, City) SAIGON, SOUTH VIET NAM	

SECTION II AGENCY OVERSEAS SERVICE

AREA	TYPE TOUR	FROM	TO
IJARAN	PCS 56	94/08/01	96/07/01
IJARAN	TDY 96	96/08/01	96/11/01
MEXICO	TDY 96	97/02/01	97/08/01
PHILIPPINE ISLANDS	PCS 96	97/09/01	99/03/29
IJARAN	PCS 45	61/04/24	66/09/34
VIETNAM	PCS 6	67/01/04	68/10/3

OVERSEAS DATA
 COLLED
 DATE: 16 OCT 1968
 INITIALS:

SECTION III EDUCATION

DEGREE	MAJOR FIELD	COLLEGE	YEAR
NO COLLEGE DEGREE ON RECORD			

FORM 147 3443 May 7-67

SECRET

GROUP 1 Excluded from automatic downgrading and declassification

28 FEB 1970 (451)

SECRET

When Filled In

SECTION III		EDUCATION (Cont'd)				
HIGH SCHOOL						
LAST HIGH SCHOOL ATTENDED		ADDRESS (City, State, Country)			YEARS ATTENDED (From To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO
COLLEGE OR UNIVERSITY STUDY						
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM. / QTR HRS. (Specify)
	MAJOR	MINOR				
1. U. OF MD. Tachikawa, Japan		ENG I	1966			3
2. U. OF MD. Tachikawa, Japan		PHY 10	1966			3
3. U. OF MD. SAIGON		HIS 127	1967			3
4. U. OF MD. SAIGON		NEW 31	1967			3
5. U. OF MD. SAIGON		PSY 1	1967			3
6. IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.						
<p>CS.</p> <p>ATIAO DVAI</p>						
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
1.						
2.						
3.						
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
1.						
2.						
3.						
4.						
5.						
AGENCY SPONSORED EDUCATION						
Specify which, if any, of the education shown in Section III was Agency sponsored						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
1.						
2.						
3.						
4.						
5.						

SECRET

SECRET

(When Filled In)

SECTION IV <u>NONE</u>		GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL					
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY ... CHECK (X)			
				REST. DEVICE	TRAVEL	STUDY	WORK ASSIGNMENT

SECTION V NONE **TYPING AND STENOGRAPHIC SKILLS**

1. TYPING (WPM) 2. SHORTHAND (WPM) 3. INDICATE SHORTHAND SYSTEMS USED - CHECK (X) APPROPRIATE ITEM:
 GREGG SPEEDWRITING STENOTYPE OTHER SPECIFY

4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (comptometer, mimeograph, card punch, etc.)

SECTION VI NONE **SPECIAL QUALIFICATIONS**

1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.

2. EXCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4, SECTION V, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (include CW speed, sending & receiving), OFFSET PRESS, TURRET LATHE, EDP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES.

3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC.?

YES NO

4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. Provide license registry number if known.

5. FIRST LICENSE/CERTIFICATE (year of issue)

6. LATEST LICENSE/CERTIFICATE (year of issue)

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (do NOT submit copies unless requested). INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (non-fiction or scientific articles, general interest subjects, novels, short stories, etc.)

8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED

9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

SECRET

(When Filled In)

SECTION VIII			AGENCY EMPLOYMENT HISTORY		
1. INCLUSIVE DATES (From-to-by month & year)	2. LOCATION (Country, City)	3. DIRECTORATE OFFICE OR DIVISION BRANCH	4. TITLE OF JOB	5. GRADES HELD IN JOB	6. DESCRIPTION OF DUTIES
APR 67 - DEC 68	SINGAPORE	FE	CHIEF OF REGISTRY	GS-9	
APR 61 - SEPT 66	Tokyo, JAPAN	FE	CHIEF OF REGISTRY	GS-9	SUPERVISED 7 EMPLOYEES IN REGISTRY WORK.
FEB 59 - MAR 61	WASH. D.C.	FE	RECORDS ADMIN OFFICER	GS-9	ASSIST THE FE RMO IN THE MANAGEMENT OF FE RECORDS. INCLUDED CLOSE LIAISON WITH RID. ALSO INVOLVED 4 MONTHS OF HALF-DAY WORK WITH DDP/MACHINE RECORD GROUP IN SETTING UP THE APERTURE CARD SYSTEM.

SECRET

- 5 -

SECRET

When Filled In

SECTION VIII			AGENCY EMPLOYMENT HISTORY (Cont'd)		
1. INCLUSIVE DATES (From-To-by month & year)	2. LOCATION (Country, City)	3. DIRECTORATE OFFICE OR DIVISION, BRANCH			
AUG 57 - FEB 59	MANILA, P.I.	FE			
4. TITLE OF JOB	5. GRADES HELD IN JOB				
CHIEF OF RECORDS MANAGEMENT TEAM	GS-7 & GS-9				
6. DESCRIPTION OF DUTIES					
<p>CHIEF OF A TEAM OF THREE INDIVIDUALS WERE STATIONED PCS MANILA BUT TRAVELLED THROUGHOUT THE F.E. (INCLUDING AUSTRALIA) TO SET UP RECORD SYSTEMS, INCLUDING REGISTRY, ACCORDING TO HEADQUARTERS REGULATION. THIS WAS TO ENSURE THAT FIELD SYSTEMS WOULD BE IN LINE WITH HQS PROCEDURES.</p>					
1. INCLUSIVE DATES (From-To-by month & year)	2. LOCATION (Country, City)	3. DIRECTORATE OFFICE OR DIVISION, BRANCH			
FEB 57 - JULY 57	MEXICO CITY, MEXICO	WH			
4. TITLE OF JOB	5. GRADES HELD IN JOB				
TEAM MEMBER OF RECORDS MANAGEMENT TEAM	GS-7				
6. DESCRIPTION OF DUTIES					
<p>MEMBER OF A TEAM OF 4 PERSONS SENT TO MEXICO TO ESTABLISH AND STREAMLINE A SYSTEM OF RECORDS THIS INVOLVED SETTING UP A 201 SYSTEM, BETTER NAME TRACE SYSTEM, CHARGE-OUT SYSTEM FOR FILES AND THE MICROFILMING OF FBI RECORDS. MY MAIN SPECIALTY WAS 201'S.</p>					
1. INCLUSIVE DATES (From-To-by month & year)	2. LOCATION (Country, City)	3. DIRECTORATE OFFICE OR DIVISION, BRANCH			
AUG 54 - NOV 56	Fuchun P.S. Szechwan, KOREA & Yokohama, JAPAN	FE			
4. TITLE OF JOB	5. GRADES HELD IN JOB				
ADMIN ASSISTANT	GS-5 & GS-7				
6. DESCRIPTION OF DUTIES					
<p>NAME TRACES AND OTHER REGULAR REGISTRY DUTIES.</p>					

SECRET

SECRET

(When Filled In)

SECTION II		MARITAL STATUS		
1. PRESENT STATUS (Single Married Widowed Separated Divorced Annulled Remarried) SPECIFY <u>MARRIED</u>				
2. NAME OF SPOUSE <u>Woods</u> <u>LOUISE</u> <u>HOUE</u> <u>FALLON</u>				
3. DATE OF BIRTH <u>8 MAY 1937</u>		4. PLACE OF BIRTH (City, State, Country) <u>BROOKLYN, NEW YORK</u>		
5. OCCUPATION <u>HOUSE WIFE</u>		6. PRESENT EMPLOYER <u>NA</u>		
7. CITIZENSHIP <u>AMERICAN</u>		8. FORMER CITIZENSHIPS (COUNTRIES)		9. DATE U.S. CITIZENSHIP ACQUIRED
SECTION III				
DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE				
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
<u>CHRISTINE MARIE</u>	<u>DAU.</u>	<u>APR 14, 1963</u> <u>TOKYO, JAPAN</u>	<u>AMERICAN</u>	<u>DECEASED July 63</u>
SECTION XI				
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)		DATE OF MEMBERSHIP
<u>NONE</u>				FROM TO
DATE		SIGNATURE OF FILLER		
<u>9 OCT 68</u>		<u>James S Woods</u>		

SECRET

SECRET
(When Filled In)

AP

PERIODIC SUPPLEMENT PERSONAL HISTORY STATEMENT		THIS DATE
Return to 1604 Curie		
INSTRUCTIONS		
This form provides the means whereby your official personnel file will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through III in their entirety. You need complete Sections VII through XIII only if there has been a change since you entered on duty with the organization or if you believe the item is more complete than you have previously reported.		
SECTION I		
1. FULL NAME (Last-First-Middle) WOODS, JAMES SAUVIE		
2. CURRENT ADDRESS (No., Street, City, Zone, State) 2224 F. ST. N.W. WASH. D.C.		3. PERMANENT ADDRESS (No., Street, City, Zone, State) FOREST RIVER, NORTH DAKOTA
4. HOME TELEPHONE NUMBER NA 4791	5. STATE, TERRITORY, POSSESSION OR COUNTRY IN WHICH YOU NOW CLAIM RESIDENCE U.S.A.	
SECTION II		
PERSON TO BE NOTIFIED IN CASE OF EMERGENCY		
1. NAME (Last-First-Middle) PREFERABLY RESIDING IN U.S. MR. ROSS A WOODS		2. RELATIONSHIP FATHER
3. HOME ADDRESS (No., Street, City, Zone, State, Country) FOREST RIVER, NORTH DAKOTA		
4. BUSINESS ADDRESS (No., Street, City, Zone, State, Country). INDICATE NAME OF FIRM OR EMPLOYER, IF APPLICABLE FOREST RIVER, NORTH DAKOTA		
5. HOME TELEPHONE NUMBER 4791	6. BUSINESS TELEPHONE NUMBER NA	7. BUSINESS TELEPHONE EXTENSION NA
8. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Spouse, Mother, Father) MAY ALSO BE NOTIFIED. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE. NA		
SECTION III		
MARRITAL STATUS		
1. CHECK (X) ONE: <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDDED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> ANNULLED		
2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS 12 SEP 50		
WIFE OR HUSBAND: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving date, reason for all previous marriages. If marriage is contemplated, provide same data for fiance.		
3. NAME (First) (Middle) (maiden) (Last)		
4. DATE OF MARRIAGE	5. PLACE OF MARRIAGE (City, State, Country)	
6. HIS (OR HER) ADDRESS BEFORE MARRIAGE (No., Street, City, State, Country)		
7. LIVING	8. DATE OF DEATH	9. CAUSE OF DEATH
10. CURRENT ADDRESS (Give date address, if deceased)		
11. DATE OF BIRTH	12. PLACE OF BIRTH (City, State, Country)	
13. IF BORN OUTSIDE U.S. DATE OF ENTRY		14. PLACE OF ENTRY
15. CITIZENSHIP (Country)		16. DATE ACQUIRED
17. WHERE ACQUIRED (City, State, Country)		
18. OCCUPATION		19. PRESENT EMPLOYER (Also give former employer, or if school or university or unemployed, list two employers)
20. EMPLOYER'S OR OWNERS ADDRESS (No., Street, City, State, Country)		

INDEXED
12 SEP 50
RECORDED

SECTION III CONTINUED TO PAGE 2

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(When Filled In)

SECTION III CONTINUED FROM PAGE 1

21. DATES OF MILITARY SERVICE (From and To) BY MONTH AND YEAR	
22. BRANCH OF SERVICE	23. COUNTRY WITH WHICH MILITARY SERVICE AFFILIATED
24. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN	

SECTION IV RELATIVES BY BLOOD, MARRIAGE OR ADOPTION LIVING ABROAD OR WHO ARE NOT U.S. CITIZENS

1	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
2	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
3	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
4	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT

5. SPECIAL REMARKS, IF ANY, CONCERNING THESE RELATIVES

NA

SECTION V FINANCIAL STATUS

1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? YES NO

2. IF YOUR ANSWER IS "NO" TO THE ABOVE, STATE SOURCES OF OTHER INCOME

NA

3. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS

NAME OF INSTITUTION	ADDRESS (City, State, Country)
UNION TRUST CO.	WASHINGTON, D.C.

SECTION V CONTINUED TO PAGE 3

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(When Filled In)

SECTION V CONTINUED FROM PAGE 2

4. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? YES NO

5. IF YOUR ANSWER IS "YES" TO THE ABOVE QUESTION, GIVE PARTICULARS, INCLUDING COURT AND DATE(S)
NA

6. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION, OR COMPENSATION FOR MILITARY OR NAVAL SERVICE? YES NO

7. IF YOUR ANSWER IS "YES" TO THE ABOVE QUESTION, GIVE COMPLETE DETAILS
NA

8. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTION WITH, NON-U.S. CORPORATIONS OR BUSINESSES OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS? YES NO IF YOU HAVE ANSWERED "YES", GIVE COMPLETE DETAILS ON A SEPARATE SHEET AND ATTACH IN A SEALED ENVELOPE.

SECTION VI CITIZENSHIP

1. PRESENT CITIZENSHIP (COUNTRY)
U.S.A.

2. CITIZENSHIP ACQUIRED BY - CHECK (X) ONE:
 BIRTH MARRIAGE OTHER (Specify):

3. HAVE YOU TAKEN STEPS TO CHANGE YOUR PRESENT CITIZENSHIP? YES NO

4. GIVE PARTICULARS
NA

5. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, INDICATE PRESENT STATUS OF YOUR APPLICATION (File papers, etc.)
NA

SECTION VII EDUCATION

1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED

<input type="checkbox"/> LESS THAN HIGH SCHOOL GRADUATE	<input type="checkbox"/> OVER TWO YEARS OF COLLEGE - NO DEGREE
<input type="checkbox"/> HIGH SCHOOL GRADUATE	<input type="checkbox"/> BACHELOR'S DEGREE
<input checked="" type="checkbox"/> TRADE, BUSINESS, OR COMMERCIAL SCHOOL GRADUATE	<input type="checkbox"/> GRADUATE STUDY LEADING TO HIGHER DEGREE
<input type="checkbox"/> TWO YEARS COLLEGE OR LESS	<input type="checkbox"/> MASTER'S DEGREE
	<input type="checkbox"/> DOCTOR'S DEGREE

2. COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		DATES ATTENDED		DEGREE REC'D	DATE REC'D	SEM/OTR. HOURS SPECIFY
	MAJOR	MINOR	FROM	TO			
NA							

3. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL MONTHS
		FROM	TO	
HADLICK'S PRIVATE BUSINESS SCHOOL GRAND FORKS, N. DAK.	ACCOUNTING	NOV-48	APR-49	9 MONTHS
		OCT-49	FEB-50	

4. MILITARY TRAINING (Full time duty in specialized schools such as Ordnance, Intelligence, Communications, etc.)

NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL MONTHS
		FROM	TO	
NA				

5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE
NA

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(When Filled In)

SECTION VIII FOREIGN LANGUAGE ABILITIES									
LANGUAGE <small>(List below each language in which you possess any degree of competence. Indicate your proficiency to read, write or speak by placing a check (X) in the appropriate boxes)</small>	COMPLETENCE - IN ORDER LISTED					HOW ACQUIRED			
	EQUIVALENT TO NATIVE FLUENCY	FLUENT BUT NOT CONSIDERABLY FOREIGN	ADEQUATE FOR RESEARCH	ADEQUATE FOR TRAVEL	LIMITED KNOWLEDGE	NATIVE TO COUNTRY	PROLONGED RESIDENCE	CONTACT (WITH PARENTS ETC.)	ACADEMIC STUDY (ALL LEVELS)
	R - READ W - WRITE S - SPEAK								
R W R W R W R W R W									
CANCELLED									
2. IF YOU HAVE CHECKED "ACADEMIC STUDY" UNDER "HOW ACQUIRED", INDICATE LENGTH AND INTENSIVENESS OF STUDY									
3. DESCRIBE YOUR ABILITY TO DO SPECIALIZED LANGUAGE WORK INVOLVING VOCABULARIES AND TERMINOLOGY IN THE SCIENTIFIC, ENGINEERING, TELECOMMUNICATIONS, MILITARY OR ANY OTHER SPECIALIZED FIELD									
SECTION IX GEOGRAPHIC AREA KNOWLEDGE									
1. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE KNOWLEDGE GAINED AS A RESULT OF RESIDENCE, TRAVEL, STUDY OR WORK ASSIGNMENT. UNDER COLUMN "TYPE OF SPECIALIZED KNOWLEDGE", INDICATE TYPE OF KNOWLEDGE SUCH AS TERRAIN, COASTS, HARBORS, UTILITIES, RAILROADS, INDUSTRIES, POLITICAL PARTIES, ETC.									
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE, TRAVEL, ETC.	KNOWLEDGE ACQUIRED BY						
			RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT			
NA									
2. INDICATE THE PURPOSE OF VISIT, RESIDENCE OR TRAVEL FOR EACH OF THE REGIONS OR COUNTRIES LISTED ABOVE									
NA									
SECTION X TYPING AND STENOGRAPHIC SKILLS									
1. TYPING (W.P.M.)		2. SHORTHAND (P.M.)		3. SHORTHAND SYSTEM USED - (CHECK (X) APPROPRIATE ITEM)					
30	NA	CREGG	SPEEDWRITING	STENOGRAPHY	OTHER (Specify):				
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (Computester, Micrograph, Card Punch, etc.)									
NA									
SECTION XI SPECIAL QUALIFICATIONS									
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH									
NA									
2. INDICATE ANY SPECIAL QUALIFICATIONS, RESULTING FROM EXPERIENCE OR TRAINING, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION OR TYPE OF WORK									
NA									
3. EXCLUDING EQUIPMENT NOTED IN SECTION X, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT OR MACHINES SUCH AS OPERATION OF SHORTWAVE RADIO, MULTILITH, TURRET LATHE, SCIENTIFIC AND PROFESSIONAL DEVICES, ETC.									
NA									
4. IF YOU ARE A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (Pilot, Electrician, Radar Operator, Teacher, Lawyer, CPA, Medical Technician, etc.), INDICATE THE KIND OF LICENSE OR CERTIFICATE, NAME OF ISSUING STATE, AND REGISTRY NUMBER, IF KNOWN.									
NA									
5. FIRST LICENSE OR CERTIFICATE (Year of issue)					6. LATEST LICENSE OR CERTIFICATE (Year of issue)				
NA					NA				

SECRET

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(When Filled In)

SECTION XI CONTINUED FROM PAGE 8

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not submit copies unless requested). INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-fiction, scientific articles, general interest, subjects, novels, short stories, etc.)

NA

8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED

NA

9. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

NA

10. LIST ANY PROFESSIONAL, ACADEMIC OR HONORARY ASSOCIATIONS OR SOCIETIES IN WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER. LIST ACADEMIC HONORS YOU HAVE RECEIVED.

NA

SECTION XII ORGANIZATION WORK EXPERIENCE - SINCE LAST COMPLETION OF A PERSONNEL QUALIFICATIONS QUESTIONNAIRE

1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
APR 1952 - JUNE 1954	4	RI
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
NONE	FILE CLERK	
6. DESCRIPTION OF DUTIES		
WORKED IN FILES DOING FILING AND OTHER RELATED DUTIES. WORKED IN CONSOLIDATION WITH 201'S		
1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
JULY 54 - JUNE 56	5	FE/6 OVERSEAS
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
NONE	INTELL ANALYST	
6. DESCRIPTION OF DUTIES		
HEAD OF PERSONALITY FILE (201 FILES) SECTION FOR BASE, WHICH INCLUDED ALL AGENT FILES.		
1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
AUG 56 - NOV 56	7	RI AN TDY OVERSEAS FOR FE/6
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
5	INTELL ANALYST	
6. DESCRIPTION OF DUTIES		
RETIREMENT OF RECORDS TO Hqs FROM BASE. SET UP ^{NEW} SYSTEM OF RECORDS FOR BASE		
1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
DEC 56 - JAN 57	7	RI
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
NONE	INTELL ANALYST	
6. DESCRIPTION OF DUTIES		
WORKED IN RI/AN 201 SECTION IN FILLING OUT 831'S		
1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
FEB 57 - AUG 57	7	RI TDY - MEXICO
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
NONE	INTELL ANALYST	
6. DESCRIPTION OF DUTIES		
SET UP SYSTEM OF RECORDS FOR STATION		

(Use additional pages if required)

SECRET
3

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(When Filled In)

SECTION XIII CHILDREN AND OTHER DEPENDENTS

1. NUMBER OF CHILDREN (including stepchildren and adopted children) WHO ARE UNMARRIED, UNDER 21 YEARS OF AGE, AND ARE NOT SELF-SUPPORTING. ▶

2. NUMBER OF OTHER DEPENDENTS (including spouse, parents, grandparents, sister, etc.) WHO DEPEND ON YOU FOR AT LEAST 50% OF THEIR SUPPORT, OR, CHILDREN OVER 21 YEARS OF AGE WHO ARE NOT SELF-SUPPORTING. ▶

3. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS

NAME	RELATIONSHIP	YEAR OF BIRTH	SEX		CITIZENSHIP	ADDRESS
			M	F		

ADDITIONAL COMMENT AND/OR CONTINUATION OF PRECEDING ITEMS

Can't recall addresses but lived in the following places since Apr 1952 -

- Corn. Ave. N.W. D.C.*
- Minnesota Ave. S.E. D.C.*
- Colonial Terrace, ~~VA~~ Arlington, VA.*
- Greenbrier St, Arlington, VA.*

DATE COMPLETED *10 Sept 57* SIGNATURE OF EMPLOYEE *James S Shoads*

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(When Filled In)

(1-6)		LANGUAGE DATA RECORD		
110032				
PART I-GENERAL				
1. NAME (Last-First-Middle) (17-24)		2. DATE OF BIRTH (25-30)		
Woods, James S		MONTH	DAY	YEAR
		Feb	20	1928
3. LANGUAGE (31-33)	4. TODAY'S DATE (34-39)		5.	
ood	MONTH	DAY	YEAR	<input checked="" type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE
	9	9	57	
PART II-LANGUAGE ELEMENTS				
SECTION A. Reading (40)				
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.				
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.				
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.				
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.				
5. I HAVE NO READING ABILITY IN THE LANGUAGE.				
SECTION B. Writing (41)				
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.				
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.				
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.				
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.				
5. I CANNOT WRITE IN THE LANGUAGE.				
SECTION C. Pronunciation (42)				
1. MY PRONUNCIATION IS NATIVE.				
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.				
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN; BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.				
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.				
5. I HAVE NO SKILL IN PRONUNCIATION.				
CONTINUE ON REVERSE SIDE				

CONTINUATION OF PART II-LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

- 1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
- 2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
- 3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
- 4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
- 5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E.

Understanding (44)

- 1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
- 2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKEs AND PUNS.
- 3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
- 4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
- 5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II, TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

- 1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
- 2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
- 3. BOTH OF THE ABOVE STATEMENTS APPLY.
- 4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV-CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 29-117, PAR. 1C(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED

9 Sept 57

SIGNATURE

James S. Stoddard

APPLICATION FOR FEDERAL EMPLOYMENT

INSTRUCTIONS: In order to prevent delay in consideration of your application, answer every question on this form clearly and completely. Type or print in INK. In applying for a specific United States Civil Service examination, read the examination announcement carefully and follow all directions. If you are applying for a WRITING examination, follow the

instructions on the admission card regarding disposition of this application. If you are applying for an UNWRITING examination, mail this application to the office named in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.

APPLICATION NO.	NAME OF EXAMINATION OR KIND OF POSITION APPLIED FOR Accountant			DO NOT WRITE IN THIS BLOCK For Use of Civil Service Commission Only				
	T. PLACE OF EXAMINATION (City and State) Washington D.C.			L. DATE OF THIS APPLICATION		MATERIAL <input type="checkbox"/> AFFOR. <input type="checkbox"/> SUBMITTED <input type="checkbox"/> NON AFFOR. <input type="checkbox"/> RETURNED		ENTERED REGISTER
ANNOUNCEMENT	1. NAME (First name) (Middle) (Last) James Sauvie Woods			INITIATION: _____ APP. REVIEW: _____				
	2. (A) STREET AND NUMBER OR R. D. NUMBER 2817 Conn. Ave., N.W.			APPROVED: _____				
	(B) CITY OR POST OFFICE (including postal zone) AND STATE Washington 8, D.C.			OPTION	GRADE	LEARNED RATING	PREFER- ENCE	AUGM. RATING
	3. LEGAL OR VOTING RESIDENCE (State) N. Dak.			(A) OFFICE PHONE ex 8400	(B) HOME PHONE at 2612	<input type="checkbox"/> 1 POINTS (TEST.) <input type="checkbox"/> 10 POINTS <input type="checkbox"/> WIFE OR WIDOW <input type="checkbox"/> DISAB. <input type="checkbox"/> BEING INVESTIGATED		
	4. DATE OF BIRTH (month, day, year) Feb. 20, 1928			10. <input type="checkbox"/> MARRIED <input checked="" type="checkbox"/> SINGLE				
	11. PLACE OF BIRTH (city and State; if born outside U. S., name city and country) Forest River, N. Dak.							
	12. <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE			13. (A) HEIGHT WITHOUT SHOES 5 FEET 6 INCHES		(B) WEIGHT 156 POUNDS		
14. (A) HAVE YOU EVER BEEN EMPLOYED BY THE FEDERAL GOVERNMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				(B) IF SO, GIVE LAST GRADE AND DATE OF LAST CHANGE IN GRADE GS-2				
15. (A) WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? \$ 2,950 PER YEAR You will not be considered for any position with a lower entrance salary.				(C) CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: <input checked="" type="checkbox"/> IN WASHINGTON, D. C. <input checked="" type="checkbox"/> ANYWHERE IN THE UNITED STATES <input checked="" type="checkbox"/> OUTSIDE THE UNITED STATES				
(B) CHECK IF YOU WILL ACCEPT SHORT-TERM APPOINTMENT IF OFFERED, FOR <input type="checkbox"/> 1 TO 3 MONTHS <input type="checkbox"/> 3 TO 6 MONTHS <input checked="" type="checkbox"/> 6 TO 12 MONTHS				(D) IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, GIVE ACCEPTABLE LOCATIONS.				
NOTE: Acceptance or refusal of a temporary short-term appointment will not affect your opportunity to obtain a probational appointment.								
(C) IF YOU ARE WILLING TO TRAVEL, SPECIFY <input type="checkbox"/> OCCASIONALLY <input checked="" type="checkbox"/> FREQUENTLY <input type="checkbox"/> CONSTANTLY								
16. EXPERIENCE It is important for you to furnish all information requested below in sufficient detail to enable the Civil Service Commission and the appointing office of agencies to give you full credit in determining your qualifications. Use a separate block for each position. Start with your present position and work back, explaining clearly the principal tasks which you performed in each position, accounting for all periods of unemployment. Experience gained more than 15 years ago which is not pertinent to the work for which you are applying may be summarized in one or more of the blocks. If your duties changed materially while working for the same employer, use a separate block to describe each position. You may include any pertinent religious, civic, welfare, or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Military experience should be described in the spaces below in its proper sequence.								
(a) If you were ever employed in any position under a name different from that shown in Item 3 of this application, give under "Description of your work" for each position, the name used.								
(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."								
PRESENT POSITION								
DATES OF EMPLOYMENT (month, year) FROM May, 1950 TO PRESENT TIME		EXACT TITLE OF YOUR PRESENT POSITION clerk		CLASSIFICATION GRADE (if in Federal Service) GS-2		SALARY OR EARNINGS STARTING: \$ 2,450 PER YEAR PRESENT: \$ 2,830 PER YEAR		
PLACE OF EMPLOYMENT (city and State) Washington D.C.				NAME AND TITLE OF IMMEDIATE SUPERVISOR Mrs. Gervias				
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division) Treasury Dept., Penn. Ave.				KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale firm, insurance agency, manufacture of locks, etc.) Division of Disbursements				
NUMBER AND KIND OF EMPLOYERS SUPERVISED BY YOU				REASON FOR DESIRING TO CHANGE EMPLOYMENT Better Position				
CHARACTER OF YOUR WORK								
Working with vouchers and checks; checking them for names, dates, money, etc. Doing other clerical duties of a general nature.								

18 CONTINUED

② DATES OF EMPLOYMENT (month, year) FROM Feb, 1950 to May, 1950		EXACT TITLE OF YOUR POSITION Clerk & Salesman		CLASSIFICATION GRADE (if in Federal service)		SALARY OR EARNINGS STARTING \$ 180 PER month FINAL \$	
PLACE OF EMPLOYMENT (city and State) Grand Forks, N. Dak.		NAME AND TITLE OF IMMEDIATE SUPERVISOR Mr. or Mrs. Pat M. Byrne		KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.) General Tobacco & Candy Company Grand Forks, N. Dak.			
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU None		REASON FOR LEAVING To work for the Government					

DESCRIPTION OF YOUR WORK

Selling tobacco and candy. Doing office work such as taking inventories and making out sales tickets.

③ DATES OF EMPLOYMENT (month, year) FROM Oct, 1949 to Feb, 1950		EXACT TITLE OF YOUR POSITION In school		CLASSIFICATION GRADE (if in Federal service)		SALARY OR EARNINGS: STARTING \$ PER PER FINAL \$ PER	
PLACE OF EMPLOYMENT (city and State)		NAME AND TITLE OF IMMEDIATE SUPERVISOR		KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.)			
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)		NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU		REASON FOR LEAVING			

DESCRIPTION OF YOUR WORK

④ DATES OF EMPLOYMENT (month, year) FROM April, 1949 to Oct, 1949		EXACT TITLE OF YOUR POSITION Farm Laborer		CLASSIFICATION GRADE (if in Federal service)		SALARY OR EARNINGS: STARTING \$ 150 PER month FINAL \$ PER	
PLACE OF EMPLOYMENT (city and State) Inkster, N. Dak.		NAME AND TITLE OF IMMEDIATE SUPERVISOR Mr. Zeck Thomas		KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.) Zeck Thomas Inkster, N. Dak.			
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)		NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU none		REASON FOR LEAVING To go to school			

DESCRIPTION OF YOUR WORK

Doing general farm duties.

5 DATES OF EMPLOYMENT (month, year)
 FROM Oct, 1948 TO April, 1951

EXACT TITLE OF YOUR POSITION
In School

CLASSIFICATION (if in Federal Service)
(None)

SALARY OR EARNINGS
 STARTING \$ _____ PER _____
 FINAL \$ _____ PER _____

PLACE OF EMPLOYMENT (city and State)

NAME AND TITLE OF IMMEDIATE SUPERVISOR

NAME AND ADDRESS OF EMPLOYER (firm, organization, or person, if Federal, name department, bureau or establishment, and division)

KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale alk., insurance agency, manufacture of Acids, etc.)

NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU

REASON FOR LEAVING

DESCRIPTION OF YOUR WORK

If more space is required, use a continuation sheet (Standard Form No. 58) or a sheet of paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.

17. MILITARY TRAINING In the space below, describe any training received in the Armed Services (not already listed under Item 16) that would assist appointing officers in placing you most effectively. Indicate actual amount of training received, such as hours per week. Detailed information regarding any special service schools you attended is especially important. (Extra pages may be used to give full descriptions.)

DATES		LOCATION	DESCRIPTION OF TRAINING
FROM	TO		

18. EDUCATION. (Circle highest grade completed):
 1 2 3 4 5 6 7 8 9 10 11 **12**

MARK (X) THE APPROPRIATE BOX TO INDICATE SATISFACTORY COMPLETION OF
 ELEMENTARY SCHOOL JUNIOR HIGH SCHOOL SENIOR HIGH SCHOOL

(A) GIVE NAME AND LOCATION OF LAST HIGH SCHOOL ATTENDED
Forest River High, Forest River, N. Dak.

(B) SUBJECTS STUDIED IN HIGH SCHOOL WHICH APPLY TO POSITION DESIRED
English, Bookkeeping and Math

DATES ATTENDED		YEARS COMPLETED	DEGREE CONFERRED		SEMESTER HOURS CREDIT
FROM	TO		TITLE	DATE	

(C) NAME AND LOCATION OF COLLEGE OR UNIVERSITY
Hadlich's Private Business School, Grand Forks, N. Dak.

MAJOR AND SPECIALTY
Accounting & Tax

DATES ATTENDED		YEARS COMPLETED	DEGREE CONFERRED		SEMESTER HOURS CREDIT
FROM	TO		TITLE	DATE	

(D) LIST YOUR CHIEF UNDERGRADUATE COLLEGE SUBJECTS
Accounting
Income Tax

(E) LIST YOUR CHIEF GRADUATE COLLEGE SUBJECTS

(F) OTHER TRAINING, SUCH AS VOCATIONAL, BUSINESS, STUDY COLLEGE'S GIVEN THROUGH THE ARMED SERVICES INSTITUTE (show name and location of school) OR "ON-SERVICE TRAINING" IN PUBLIC OR PRIVATE EMPLOYMENT

INDICATE YOUR KNOWLEDGE OF FOREIGN LANGUAGES	READING		SPEAKING		UNDERSTOOD	
	EX. GOOD FAIR	EX. GOOD FAIR	EX. GOOD FAIR	EX. GOOD FAIR	EX. GOOD FAIR	EX. GOOD FAIR

19. INDICATE YOUR KNOWLEDGE OF FOREIGN LANGUAGES

20. IF YOU HAVE TRAVELLED OR RESIDED IN ANY FOREIGN COUNTRY, INDICATE (1) NAME OF COUNTRY (2) DATES AND LENGTH OF TIME SPENT THERE, AND (3) REASON FOR TRAVEL (e. g., military service, business, education, recreation)
Jan. 1947 to March 1948 in Japan.
Nov. 1950 to June 1951 in Japan.

21. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE (such as operating a typewriter, a mechanical calculator, etc., professional devices, etc., mechanical, turn lathe, scientific or professional devices)

22. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (such as accountant, electrician, radio operator, teacher, lawyer, CPA, etc.)?
 YES NO GIVE KIND OF LICENSE AND STATE.

23. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS (1) PATENT RIGHTS (2) PATENT APPLICATIONS (do not submit copies unless requested) (3) PUBLISHED ARTICLES (4) RESEARCH AND DEVELOPMENT EXPERIENCE (5) MEMBERSHIP IN PROFESSIONAL OR SCIENTIFIC SOCIETIES, ETC. (6) AWARDS AND HONORS RECEIVED

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING _____

35

14-02260-1

14 REFERENCES. List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Item 16 (EXPERIENCE).			
FULL NAME	PRESENT BUSINESS OR HOME ADDRESS (Give complete current address, including street and number)	BUSINESS OR OCCUPATION	
Robert Hadlich	Box 659, Grand Forks, N. Dak.	Teacher	
Calmer Hovland	521 Maple Ave. Grand Forks N. Dak.	Teacher	
Merland W Berg	618 Cottonwood St., Grand Forks N. Dak.	Teacher	
INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN			
21. MAY INQUIRY BE MADE OF YOUR PRESENT EMPLOYER REGARDING YOUR CHARACTER QUALIFICATIONS ETC?	X	25. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? If your answer is "Yes," give details in Item 39	X
26. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X	29. DOES THE UNITED STATES GOVERNMENT EMPLOY IN A CIVILIAN CAPACITY ANY RELATIVE OF YOURS (BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? If your answer is "Yes," show in Item 36 for EACH such relative: (1) full name, (2) present address; (3) relationship; (4) Department or Agency by which employed, and (5) kind of appointment	X
27. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF THE COMMUNIST PARTY U. S. A. OR ANY COMMUNIST ORGANIZATION?	X	SPECIAL INSTRUCTIONS FOR CLAIMING VETERAN PREFERENCE A. If you are claiming preference as a PEACETIME VETERAN who has been awarded a campaign badge or service ribbon, or as a DISABLED VETERAN, or as the WIFE OF A DISABLED VETERAN, or as the WIDOW OF A WAR OR CAMPAIGN VETERAN, attach Veterans Preference Claim, CSC Form 14, together with proof specified therein. B. If you are a WAR-TIME VETERAN not claiming disability preference, you should NOT submit your discharge with this application. Preference will be tentatively credited to you and if appointed, you will be required to submit to the appointing officer prior to entry on duty, official evidence of separation from active service in the armed forces of the United States in time of war.	
28. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF A FASCIST ORGANIZATION?	X	YES NO	
29. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT, OR OF AN ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH HAS ADOPTED A POLICY OF ADVOCATING OR APPROVING THE COMMISSION OF ACTS OF FORCE OR VIOLENCE TO DEPRIVE PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES OR OF SEEKING TO ALTER THE FORM OF GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTIONAL MEANS? If your answer to question 27, 28, or 29 above is "Yes," state in Item 39 the names of all such organizations, associations, movements, groups, or combination of persons and dates of membership. Give complete details of your activities therein and make any explanation you desire regarding your membership or activities therein	X	37. (A) WERE YOU EVER IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING TIME OF WAR? YES NO X	
30. SINCE YOUR 16TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED, OR IMPRISONED OR PLACED ON PROBATION, OR HAVE YOU EVER BEEN ORDERED TO POST BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE? (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$25 OR LESS WAS IMPOSED). If your answer is "Yes," list all such cases under Item 39 below. Give in each case: (1) the date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken	X	(B) IS THE WORD "HONORABLE" OR THE WORD "SATISFACTORY" USED IN YOUR DISCHARGE OR SEPARATION PAPERS TO SHOW THE TYPE OF YOUR DISCHARGE OR SEPARATION? YES NO X	
31. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? If your answer is "Yes," give in Item 39 the name and address of employer, date, and reason in each case	X	(C) WAS SERVICE PERFORMED ON AN ACTIVE FULL-TIME BASIS, WITH FULL MILITARY PAY AND ALLOWANCES? YES NO X	
32. HAVE YOU EVER BEEN BARRED BY THE U. S. CIVIL SERVICE COMMISSION FROM TAKING A FURTHER OR ACCEPTING OTHER FEDERAL APPOINTMENTS? If your answer is "Yes," give dates of and reasons for each barment in Item 39	X	DATE OF ENTRY ON ENTRIES INTO SERVICE LATE OF SEPARATION OR SEPARATIONS Oct. 1946 Oct. 1950 April 1948 August 1951 ARMY (Army, Navy, Marine Corps, Coast Guard, etc.) ER 17 214 704	
33. HAVE YOU ANY PHYSICAL HANDICAP, DISEASE OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? If your answer is "Yes," give complete details in Item 39 so that consideration can be given to your physical fitness for the job	X	38. (A) IF YOU SERVED IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING PEACETIME ONLY, DID YOU PARTICIPATE IN A CAMPAIGN OR EXPEDITION AND RECEIVE A CAMPAIGN BADGE OR SERVICE RIBBON? YES NO X	
34. (A) DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes," give complete details in Item 39	X	(B) ARE YOU A DISABLED VETERAN? If so, and you have not listed your disability in answer to Item 37, explain in Item 39 below	
35. (A) DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes," give complete details in Item 39	X	(C) ARE YOU A VETERAN'S WIDOW WHO HAS NOT REMARRIED? YES NO X	
36. (A) DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes," give complete details in Item 39	X	(D) ARE YOU THE WIFE OF A VETERAN WHO HAS A SERVICE CONNECTED PHYSICAL HANDICAP, DISEASE OR OTHER DISABILITY? YES NO X	
THIS SPACE FOR USE OF APPOINTING OFFICER ONLY The information contained in the answers to Question 37 above has been verified by comparison with the discharge certificate on _____ 19____			
Agent: _____ Title: _____			
17. STATE FOR DETAIL AND ANALYSIS TO OTHER AGENCIES (Indicate item numbers to which answers apply)			
ITEM NO. ITEM NO.			
If your application requires this paper the same shall be a guide. Write on each sheet your name, address, date of birth, and occupational title. Attach to each sheet a copy of the original.			
Before signing this application check back over it to make sure that you have answered ALL questions correctly. I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.			
False statement on this application is punishable by Law (U. S. Code, Title 18, Section 80)			
SIGNATURE OF APPLICANT: <i>Jerry S. Staska</i>			

PERSONAL HISTORY STATEMENT 1008

Read the instructions on the reverse side of this form. If you do not know the answers to the questions, you should indicate that you do not know. Do not leave any questions unanswered. If you are unable to provide an answer, you should indicate that you are unable to provide an answer.

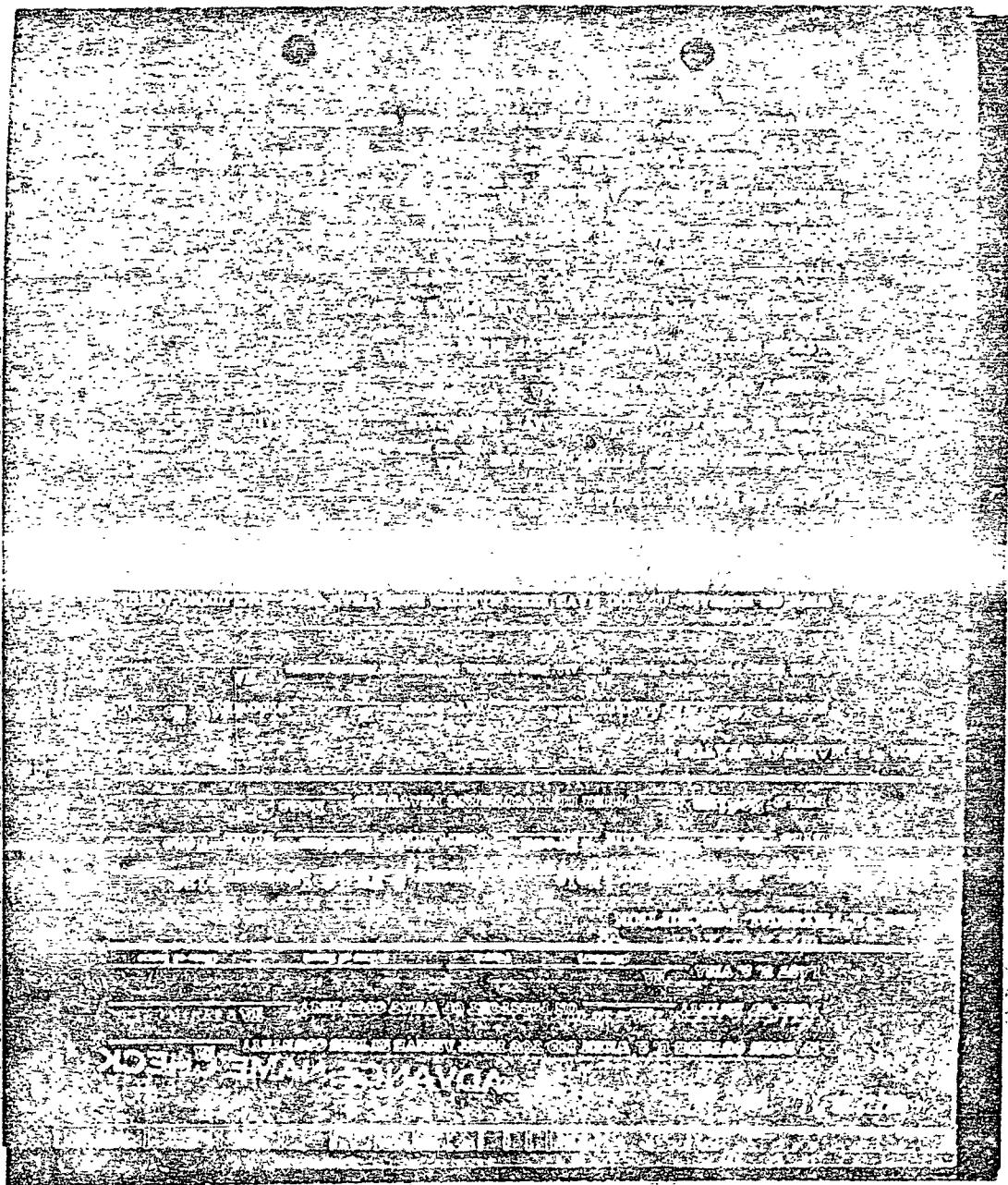
HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS ON THE REVERSE SIDE OF THIS FORM?

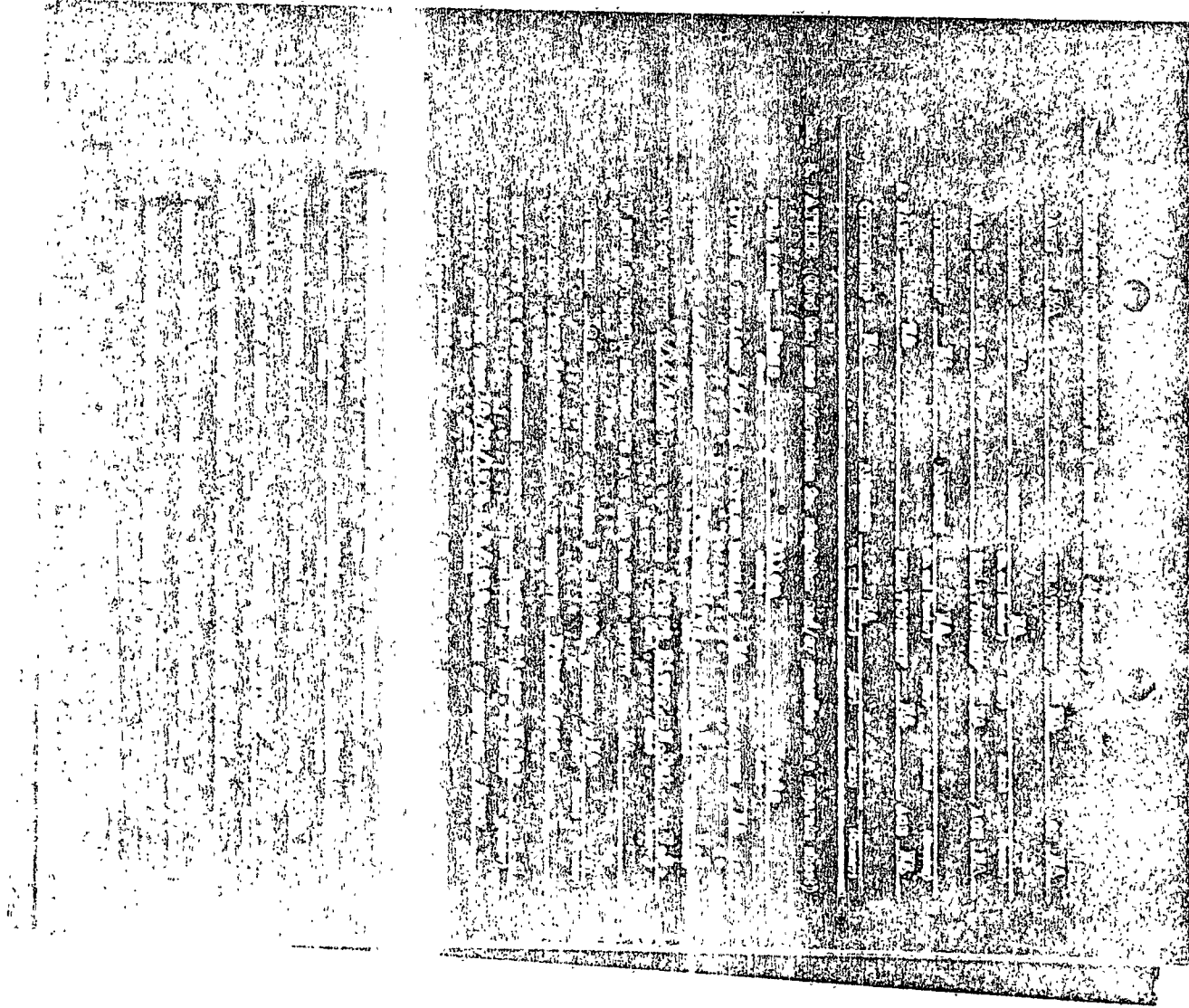
PERSONAL BACKGROUND

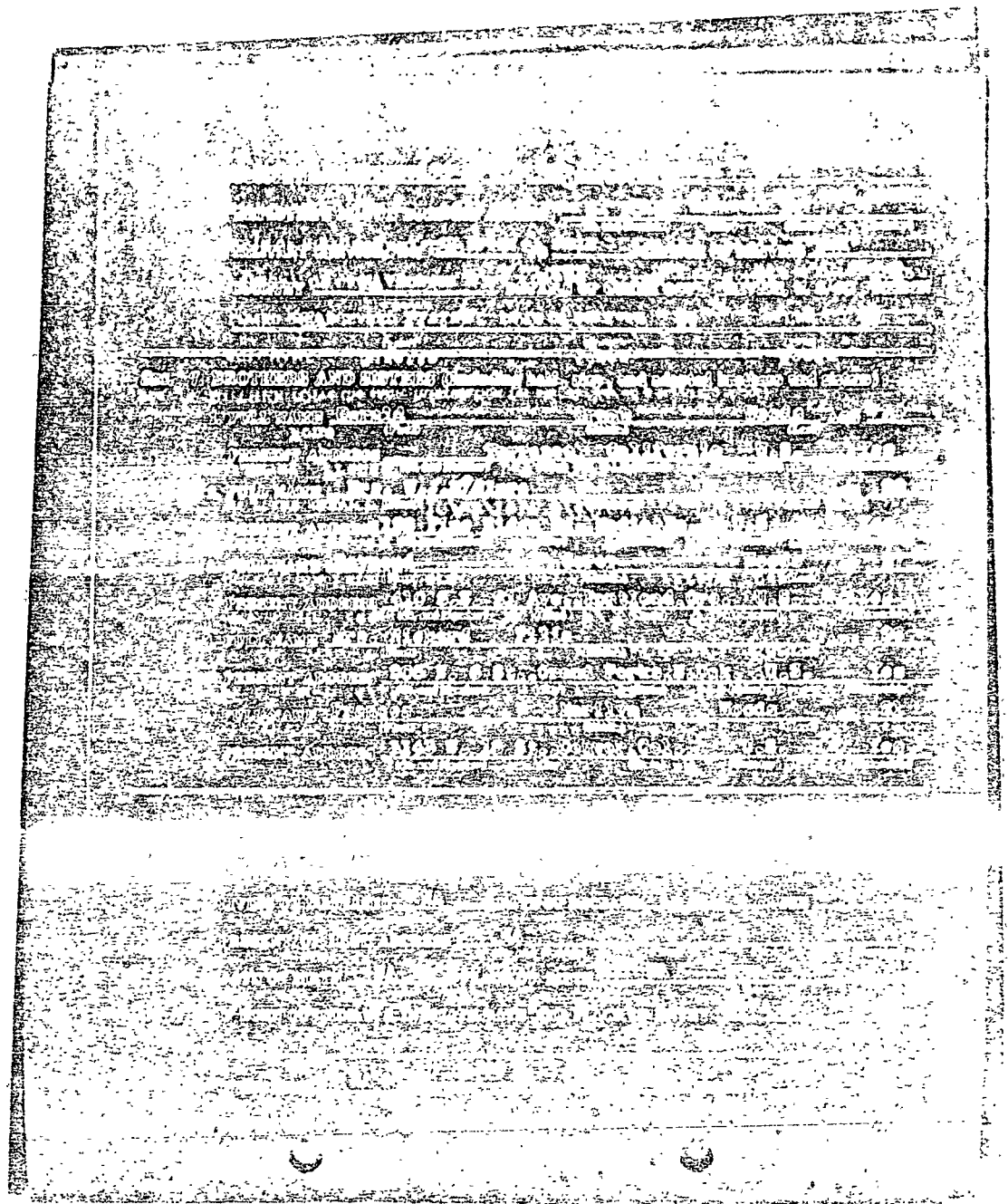
1. Name (Last, First, Middle Initial)
2. Date of Birth (Month, Day, Year)
3. Place of Birth (City, State, Country)
4. Current Address (Street, City, State, ZIP Code)
5. Previous Addresses (Street, City, State, ZIP Code)
6. Education (School, Degree, Dates)
7. Employment (Employer, Position, Dates)
8. Military Service (Branch, Rank, Dates)
9. Other (Specify)

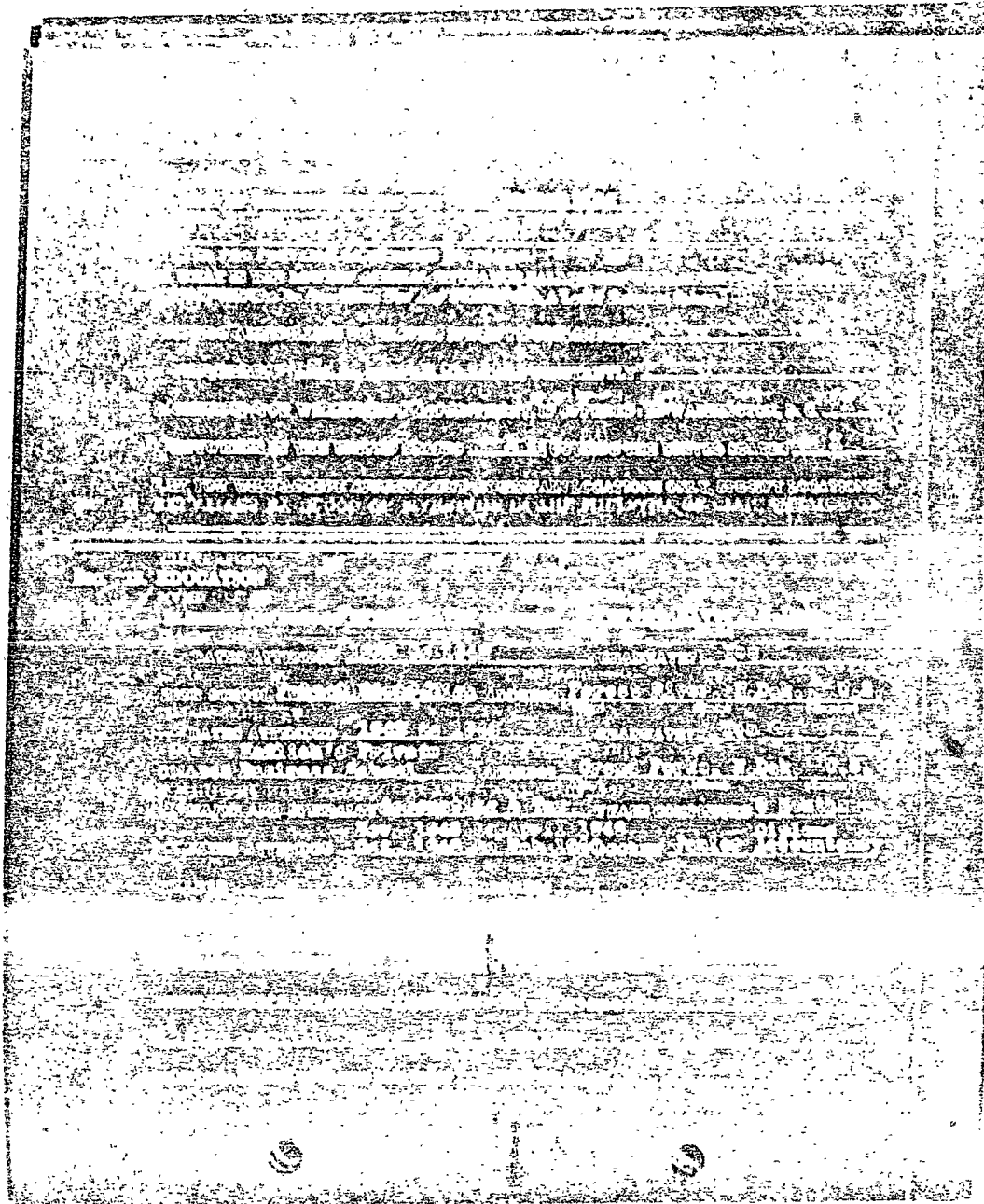
10. Family (Name, Relationship, Dates)
11. Marital Status (Single, Married, Divorced, Widowed)
12. Children (Name, Date of Birth)
13. Health (Current, Past)
14. Travel (Countries, Dates)
15. Other (Specify)

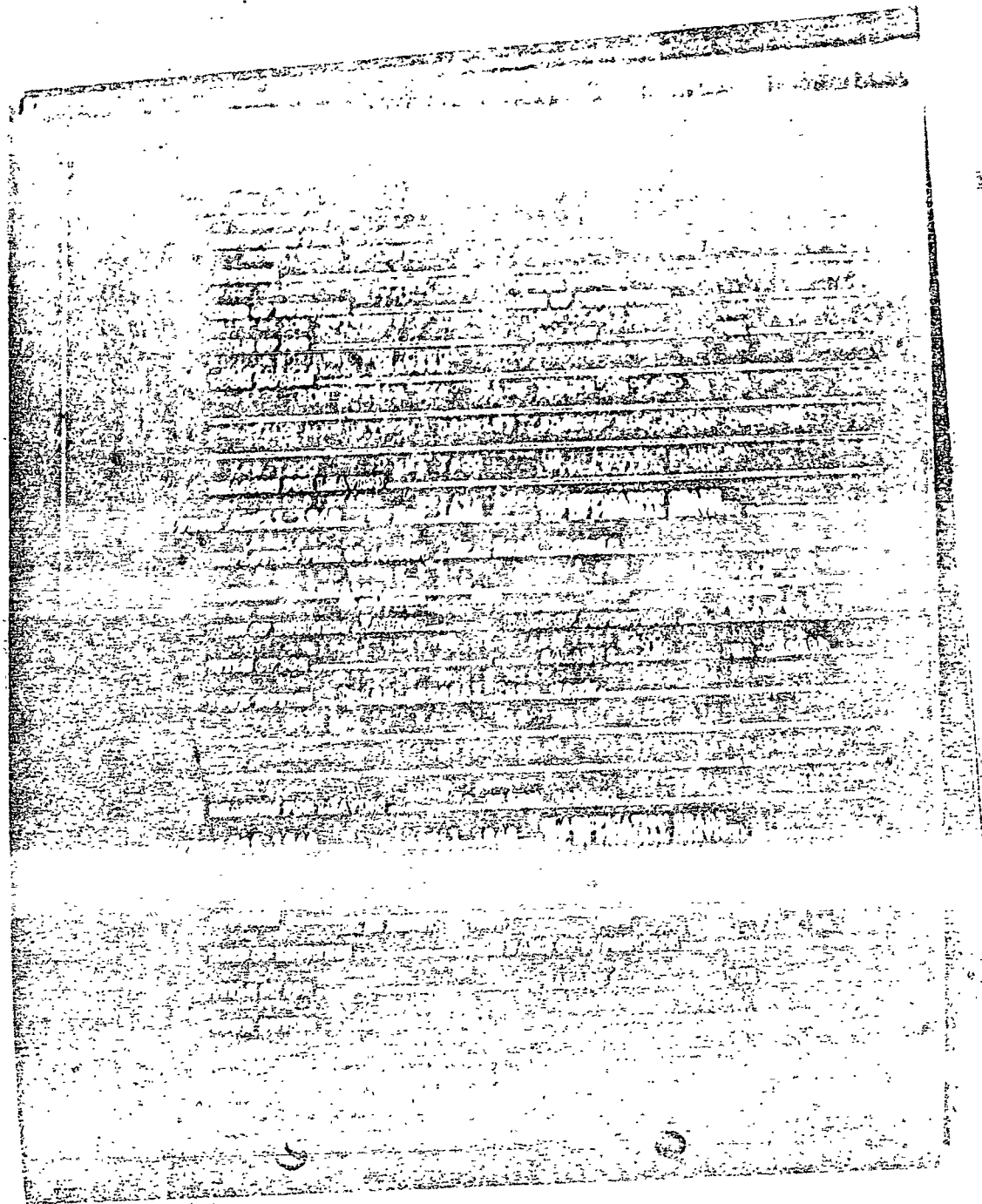
ADVANCED INFORMATION











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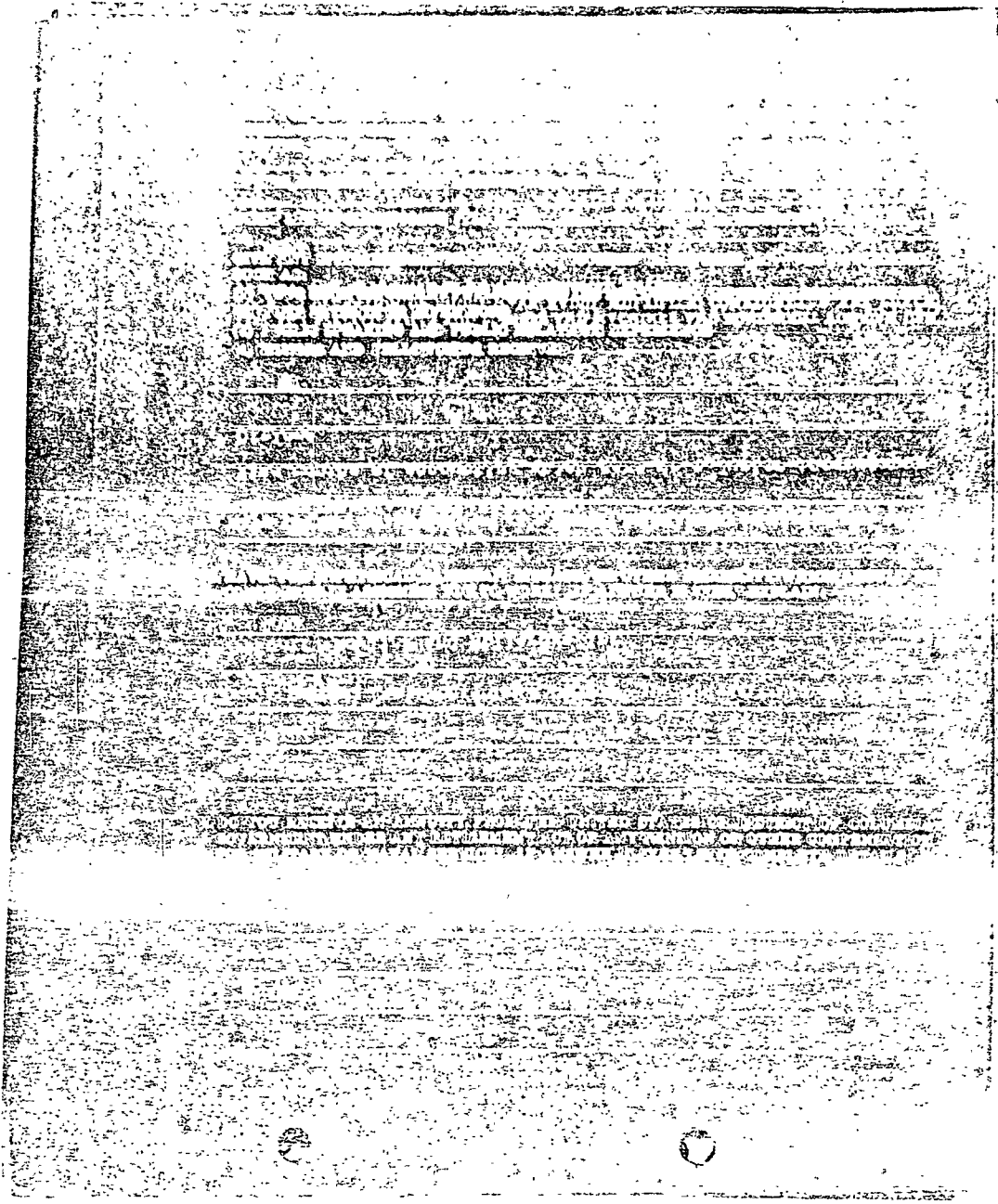
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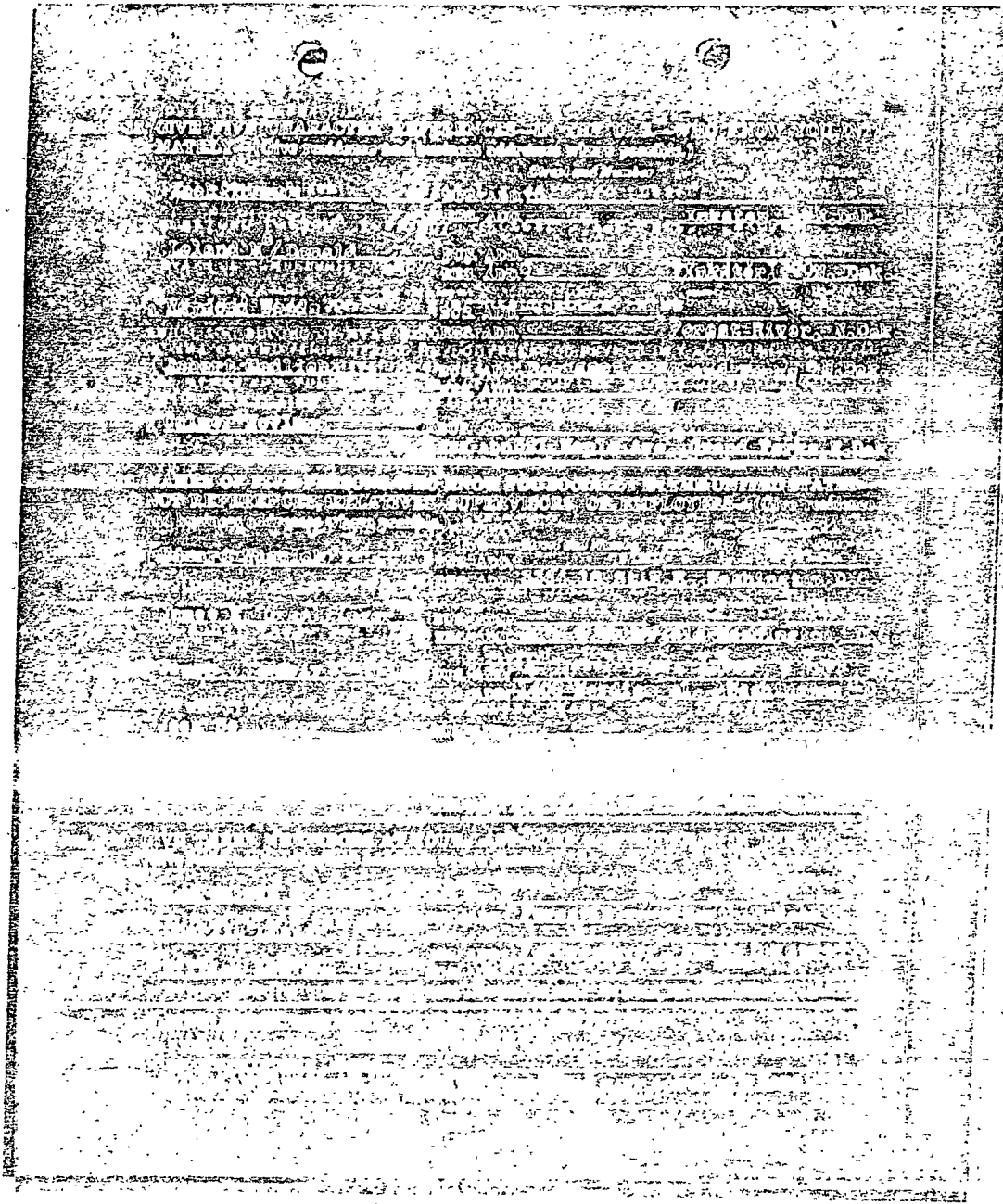
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[Section 1: Initial paragraph, possibly containing a title or header.]

[Section 2: A paragraph of text, possibly describing a process or method.]

[Section 3: A paragraph of text, possibly detailing a specific aspect of the document.]

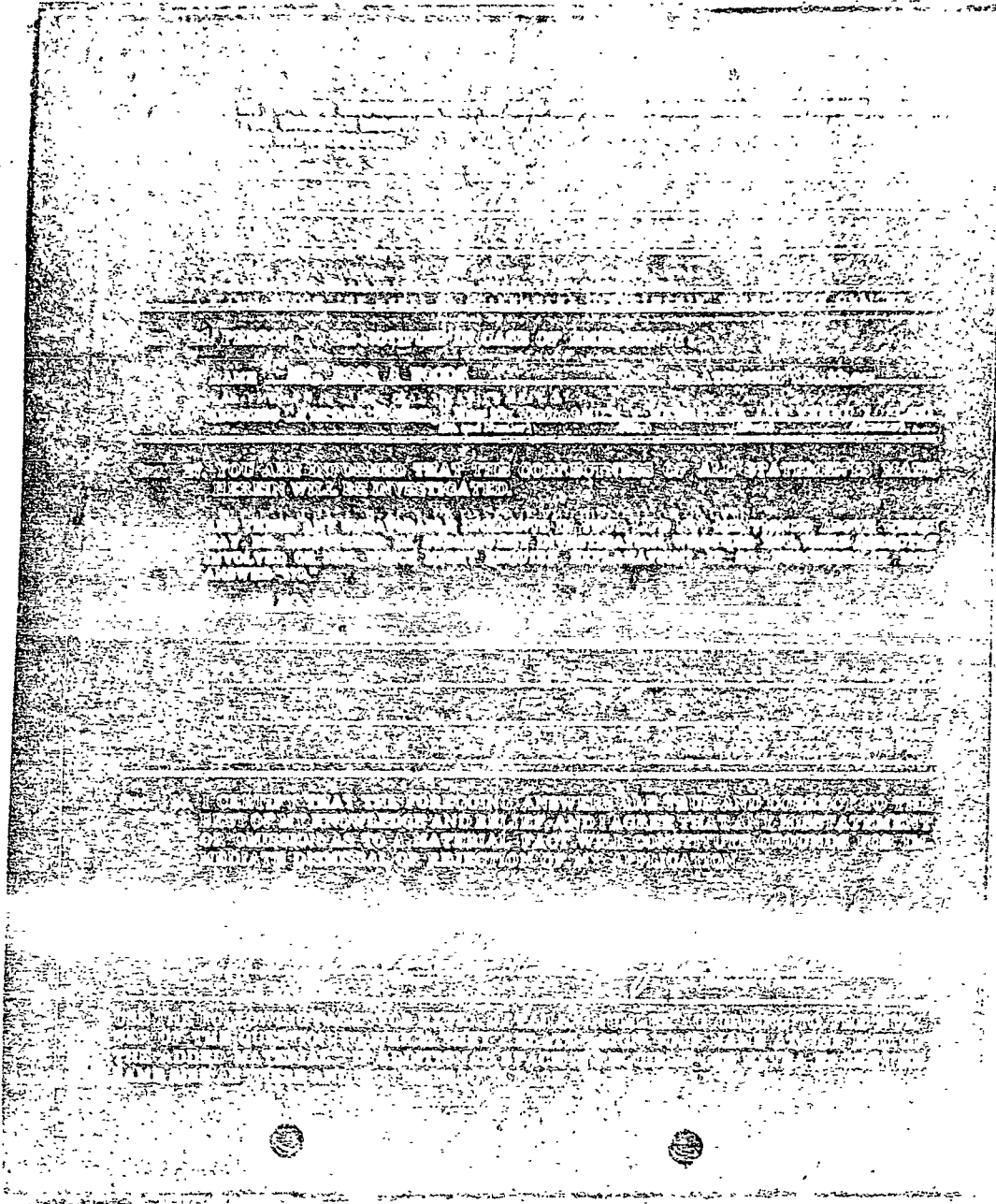
[Section 4: A paragraph of text, possibly concluding a section or providing a summary.]

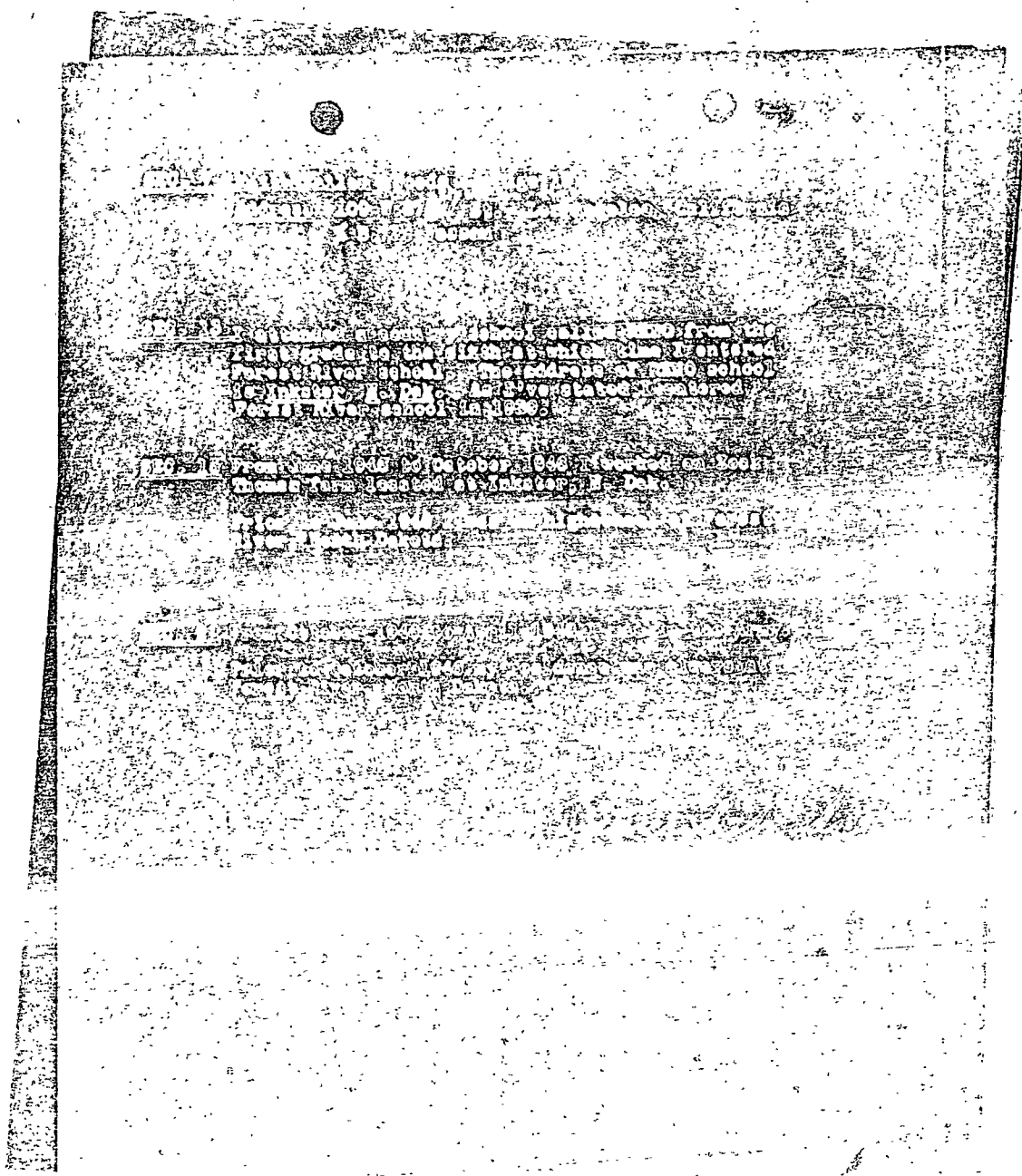
[Section 5: A paragraph of text, possibly providing additional information or instructions.]

[Section 6: A final paragraph, possibly a signature block or a closing statement.]

[Illegible text in header section]
 [Illegible text in body section]
MISCELLANEOUS
 [Illegible text in miscellaneous section]
 [Illegible text in footer section]

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Aker's School of Business

Grand Forks, North Dakota

REPORT OF PROGRESS

NAME WOODS, James S. ADDRESS Forest River, N. Dak. COURSE OF STUDY Accountancy DATE December 14, 1951

SCHOLASTIC ACHIEVEMENT

SUBJECTS COMPLETED:

	E	D	C	B	A
<u>Elementary Accounting</u>	X
<u>Advanced Accounting</u>	X
<u>Income Tax</u>	.	.	.	X	X
<u>Cost Accounting (Elem.)</u>	.	.	.	X	X
<u>Typewriting</u>	.	.	.	X	X
<u>Spelling</u>	X
<u>Business Mathematics</u>	X
<u>Business Law</u>	X
<u>Penmanship</u>	X
<u>Salesmanship</u>	X
<u>Business English</u>	X
<u>Office Machines</u>	X

KEY

- A Superior
- B Above Average
- C Average
- D Fair
- E Slow

COMPLETED SUBJECTS

PERSONAL CHARACTERISTICS

	E	D	C	B	A		E	D	C	B	A
INITIATIVE	X	Needs Supervision	Routine Worker	Fairly Progressive	Resourceful	Marked Ability	
QUALITY OF WORK	.	.	.	X	.	Careless	Inaccurate	Passable	Good Quality	Highest Quality	
QUANTITY OF WORK	.	.	.	X	.	Very Low Output	Low Output	Average Output	High Output	Very High Output	
ENTHUSIASM	X	Indifferent	Occasionally Enthusiastic	Average	Determined	Confident	
PUNCTUALITY	X	Undependable	Improvement Needed	Occasionally Absent or Late	Seldom Late	Always Punctual	
COOPERATION	X	Reluctant	Passive	Usually Agreeable	Co-operative	Co-operative	
ADAPTABILITY	.	.	.	X	.	Limited	Slow	Average	With Ease	Exceptional	

Manager *James S. Woods*

Please keep this report for future comparison

CONFIDENTIAL
SECURITY APPROVAL

Date: 26 March 1952

TO: Chief, Personnel Division
FROM: Chief, Security Division
SUBJECT: WOODS, James Earle

Your Reference: H-3007A
Case Number: 61115

1. This is to advise you of security action in the subject case as indicated below:
 - Security approval is granted the subject person for access to classified information.
 - Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.
 - The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of Paragraph H of Regulation 10-9.
2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.
3. Subject is to be polygraphed as part of the ECD procedures.

Woods, James Earle
7/2: with Clements
call back:
Bob Spunka called 7/2:
ok

C. V. Bradley
C. W. HICKOLEY

CONFIDENTIAL

116
37
sent to Kelly me

CONFIDENTIAL
SECURITY INFORMATION
INTEROFFICE MEMORANDUM

Date: 29 Feb. 1952

TO: Chief, Personnel Division

FROM: Chief, Security Division

SUBJECT: WOODS, James Savvie 61415 Request No. H-3007-A

1. Reference is made to your request for security clearance of the subject person who is being considered for employment in the following position: File Clerk, GS-2, OSO, RI, Proc. & Rec., Washington, D. C.

2. This is to advise you of the following security action:

a. Provisional security clearance is granted to permit subject's employment on a temporary basis in the following area or in the following capacity:

This clearance is granted upon the condition that subject: 1. not have access to classified material; 2. not have access to secure areas; 3. not be issued a badge or credential; 4. not represent himself as a CIA employee; and 5. not be assigned to any unclassified duties other than indicated above.

b. Name checks have been completed on this person. Arrangements should now be made by your office for an interview in this Division. Upon completion of this interview further consideration will be given to the requested limited clearance for access to information classified no higher than Secret. If subject has not entered on duty under a previously granted provisional clearance the interview should be arranged after entrance on duty.

c. Subject is security approved for temporary appointment to a position requiring access to information classified no higher than Secret.

Officials of the employing office should be advised of this security limitation and should be instructed to supply future supervisors with advice as to the limitation so as to insure continued compliance.

Security action to effect full approval is continuing and your office will receive advice of full clearance upon completion of this action. Upon receipt of full security clearance, the present limitation will be rescinded and supervisors should be advised accordingly.

3.
Cable per S. [unclear]
5 min.

[Signature]
C. V. [unclear]

CONFIDENTIAL

HR
1/25/52

W. J. ...

CONFIDENTIAL
SECURITY
INTEROFFICE MEMORANDUM

Date: 25 January 1952

TO: Chief, Personnel Division
FROM: Chief, Security Division
SUBJECT: WOODS, James Sawie #61115 Request No. H-3007

1. Reference is made to your request for security clearance of the subject person who is being considered for employment in the following position:

2. This is to advise you of the following security action:

a. Provisional security clearance is granted to permit subject's employment on a temporary basis in the following area or in the following capacity: **D Street Pool.**

This clearance is granted upon the condition that subject: 1. not have access to classified material; 2. not have access to secure areas; 3. not be issued a badge or credential; 4. not represent himself as a CIA employee; and 5. not be assigned to any unclassified duties other than indicated above.

b. Name-checks have been completed on this person. Arrangements should now be made by your office for an interview in this Division. Upon completion of this interview further consideration will be given to the requested Limited clearance for access to information classified no higher than Secret. If subject has not entered on duty under a previously granted provisional clearance the interview should be arranged after entrance on duty.

c. Subject is security approved for temporary appointment to a position requiring access to information classified no higher than Secret.

Officials of the employing office should be advised of this security limitation and should be instructed to supply future supervisors with advice as to the limitation so as to insure continued compliance.

Security action to effect full approval is continuing and your office will receive advice of full clearance upon completion of this action. Upon receipt of full security clearance, the present limitation will be rescinded and supervisors should be advised accordingly.

3.

FILE
TO
SENT
1/25/52
12
C. V. Bradley
C. V. BRADLEY

CONFIDENTIAL

OAF OF TERMINATED FILE BEING MICROFILMED