

**US ARMY AUDIT AGENCY
STATEMENT OF UNDERSTANDING**

Acknowledgement of Conditions of Employment for SCEP Positions

Students must complete this form upon initial acceptance of an offer of employment for a trainee position in the Student Career Experience Program (SCEP). They must agree to **all** conditions of employment prior to being appointed into the position.

1. I, _____, have been selected for the following US Army Audit Agency (USAAA) position:

- a. Title: **STUDENT TRAINEE (AUDITING)**
- b. Pay Plan/Series/Grade: **YP-0599-01**
- c. Field Office: XXXX Field Office,

2. I understand that appointment to this position requires acknowledgement and acceptance of the following conditions of employment which have been imposed as required by law, regulation or appropriate management authority:

- US Citizenship
- Extensive Travel When Not Attending School (i.e.; summer break, winter break)

3. I understand that I must be enrolled in school on at least a part-time basis and must be able to work at least 640 hours prior to completion of my education in order to remain in the program. I agree to provide the Agency proof of enrollment in school at the beginning of each semester and understand that failure to do so in a timely manner could result in removal from the program.

4. I understand that this position is temporary in nature, may be terminated at any time, and cannot continue beyond 120 days after my completion of education unless converted to a permanent YA-511-01 Auditor position with the Agency. If converted, I will be required to meet the following additional conditions of employment:

- Security Clearance- Secret
- Extensive TDY and Local Travel (Up to 80%)

5. I understand that failure to acknowledge and/or accept the above conditions will be grounds for withdrawal of the job offer.

6. I further understand that in the event that I don't satisfactorily meet or maintain the above condition(s) related to the performance of this position, action will be taken to remove me from the position.

7. The original of this signed acknowledgement will be filed in my official personnel file (OPF) and a copy provided to me. Accordingly, I accept this offer/condition(s) of employment.

Employee Signature

Date

HR Representative's Signature

Date