#### Department of Homeland Security Management Directive System MD Number: 3130.2

# Issue Date: 3/22/2004 EMPLOYEE DETAILS

### 1. Purpose

This directive provides general policy, guidance, and procedures and assigns authorities and responsibilities for the Secretary of the Department of Homeland Security (DHS) to approve details of employees to and from other Federal agencies or departments, within DHS, and to international organizations.

### 2. Scope

This directive applies to all DHS organizational elements. Until such time as the DHS Office of the Chief Human Capital Officer establishes permanent, Department-wide policy regarding employee details, all DHS organizational elements may continue in force their existing employee detail policies and procedures.

#### 3. Authorities

This directive is governed by numerous Public Laws and regulations, such as:

- A. The Homeland Security Act of 2002, codified in Title VI, U.S. Code
- B. 5 U.S.C. 3341 and 3343
- C. 5 CFR, part 300 subpart C and part 352 subpart C

#### 4. Definitions

This directive uses the definitions in the parts of 5 U.S.C. and 5 CFR cited in the "Authorities" section, above.

## 5. Responsibilities

- A. <u>The Secretary of Homeland Security</u>, or his or her designee, is responsible for ensuring that DHS Headquarters complies with applicable laws and regulations on details, as cited in the "Authorities" section, above.
- B. <u>The Under Secretary for Management</u>, through the DHS Chief Human Capital Officer, shall be responsible for all aspects of this directive.

C. <u>The Chief Human Capital Officer</u> shall develop department-wide guidance for details.

## 6. Policy & Procedures

#### A. **Procedures**.

- 1. <u>Detailing Other Department/Agency Employees to DHS Headquarters.</u>
- (a) The Chief Human Capital Officer will approve all details of employees to the DHS Headquarters.
- (b) All details to the headquarters will be documented on the attached form, to be completed by the requesting official, approved by the parent agency human resource office, and verified by the Office of Security that the appropriate level of U.S. Government Security Clearance has been received.
- (c) No offers of details will be made until that coordination, and the approval noted above has been given.
- (d) Additional budget and procurement reviews and approvals are required when a detail is subject to reimbursement to the parent agency.
- 2. Detailing Excepted Service Employees to the Competitive Service.
- (a) Any detail of excepted service employees to competitive service positions requires prior approval of the Office of Personnel Management.
- (b) All requests for such details will be forwarded to the DHS Chief Human Capital Officer to request such approval
- B. <u>Questions or Concerns Regarding the Process.</u> Any questions or concerns regarding this directive should be addressed to the Office of the DHS Chief Human Capital Officer.

Control No	

# Department of Homeland Security Detail Assignment

(This detail is not valid until the status of the security clearance is verified by DHS Security and the DHS Approving Official has signed Section F of this form.)

To: DHS Chief Human Capital Officer			
Section A – Employee/Detailee Information			
Last Name		First Name	Middle Initial
Pay Plan	Grade	Step	Desition Title and Home Agency
Fay Flair	Grade	Sieb	Position Title and Home Agency
SSN			
Birth date			Birthplace
Does employee hold an active U.S. Government security clearance?			
Yes ☐ (Level) No ☐ NOTE: Please have the employee request the home agency's Security Office fax his/her security			
clearance information to DHS Security at (202) 282-8406.			
	- Position In		
Position Title			Pay Plan/Series/Grade
DHS Office Tit			
	rity Clearance R		d and ability at a required)
Purpose of De	etali (Describe v	ork to be performe	d and skill sets required)
Starting Date	of Detail (Mont	h Date Year)	Ending Date of Detail (Month Date Year)
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DHS Requesti	ing Official		
Name and Positio	n Title		Signature Date
Section C – Request for Extension of Detail			
Dates of Exter	nsion <i>From:</i> <u>I</u>	Month Date Year	To: Month Date Year
Reason for Ex	tension		
DHS Requesti	ing Official Exte	nsion	
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Name and Position	Completion	of Detail	Signature Date
Date Compl		oi Detail	Performance Evaluation Completed
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Section E -	- Administra	tion	
	Designation:	(TD	P ( Non-TDP
Building Pass Required: ( DHS Headquarters DHS Admin/Facilities Verified: DHS IT Verified:			
Section F – Approving Officials			
DHS Approving Official - CHCO			
Signature: Date:			
Parent Agency HR Approving Official			
Signature:		Date:	