LEADERSHIP ASSESSMENT & ADVISORY SERVICE REQUEST FORM (DACW 72-99-D-0006)

This form must be attached to your Delivery Order and submitted to Gallup in order to obtain Gallup Services

Complete this form and fax to Gallup: 402-938-5916 Date: _____

Will Travis, Gallup Project Manager Phone: 402-938-6756 Email will_travis@gallup.com

Bill Thompson, Gallup Project Manager Phone: 402-938-6741 Email bill_thompson@gallup.com

From:

POC: _____ Title: _____

Phone: _____ Fax: _____

City: _____ State: _____ Email: _____

USACE: _____

(Name of District Division, District, Lab, etc.)

Person at District Reponsible for filing the Receiving Report on this Project when completed

Name: _____ Email: _____

Phone: _____ Fax: _____

Selecting Official Interview Information

Selecting Official: _____ Phone: _____

Immediate Supv. of position: _____ Phone: _____

Please schedule the date and time of the Selecting Official Interview with Gallup Project Manager, Will Travis, plan on scheduling this interview for a date in the 10 day period preceding panel feedback.

Selection Panel Feedback Information

Please schedule the date and time of the Panel Feedback session with Gallup Project Manager, Will Travis,

(Gallup needs a minimum of 5 business days between the last interview date and feedback)

List below all candidates for which you will want feedback.

Indicate candidates that have interviewed in the past 3 yrs. with * after name. (If unsure check with Gallup Project Manager, Will Travis (contact information top of page)**

Candidates that need to interview should call the Gallup Interviewing Center - (800) 789-3041

Candidate Information

Position: _____ Grade: _____

Candidate Name	SSN	Phone Number