

FS VSPortal Bulk Upload Spreadsh

This spreadsheet is organized in 4 worksheets to collect all information necessary to bulk import yo

Partner Master	This sheet should contain one row for the partner specific information that needs to be added or updated.
Participant Master	Please populate this sheet with a list of ALL participants that perform work on Forest Service locations for you as a partner organization
Project Master	performed at Forest Service locations by you as a partner organization
Project Participant	Please populate this sheet with the Partner Participant IDs, as well as Partner Project IDs and the relevant hours and other information. Participant ID and Project ID entered here MUST be present on the Participant Master sheet and the Project Master sheet respectively.

**** Required fields are identified by an asterisk (*) symbol**

**** Leave all the FS ID columns empty**

**** You MUST provide Partner ID columns to correctly identify participatns and projects during bu**

Paperwork Reduction Act Notice

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a p displays a valid OMB control number. The valid OMB control number for this information collection collection is estimated to average 2 hours per response, including the time for reviewing instructor needed, and completing and reviewing the collection of information.

Privacy Act Statement

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act statement serves to inform you of the following c

Purpose: The Privacy Act of 1974 requires that the Office of the Assistant Secretary for Civil Rights (requests information.

Routine Uses: The data collected for the Workforce Development spreadsheet falls under the Fores system. EUCE is an accred Forest Service employees working as part of the administration of the Na system with a corresponding, signed and approved Privacy Impact Assessment (PIA). The EUCE PIA implementing the privacy provisions of the E-Government Act of 2002. The password protected file authorized Forest Service employees working as part of the administration of the National Partners

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⟨p. XX/XX/XXXX)

FS Partner ID

***Partner Assigned ID *Partner Name**

Partner Status



***Master Agreement No.**

Address 1

Address 2

City

State

ZipCode

Contact 1 FirstName Contact 1 LastName Contact 1 Middle Initial Contact 1 Phone Contact 1 Fax

*Contact 1 E-mail Contact 2 FContact 2 Contact 2 MidContact 2 Ph Contact 2 Fax Contact 2 E-mail

Services Provided

Remarks

Research and Development

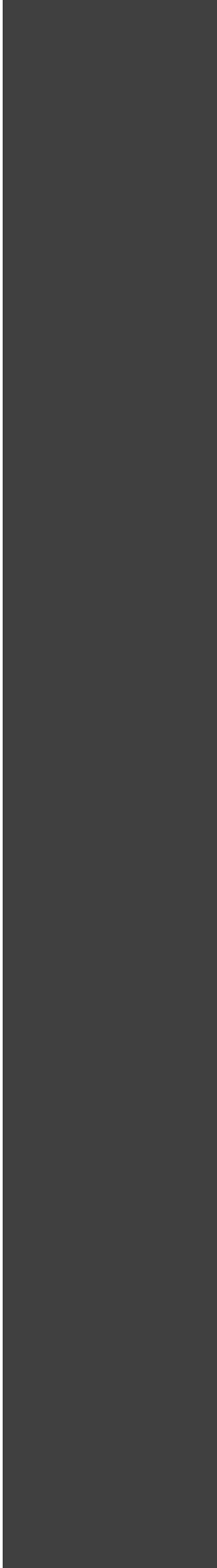
State & Private, Watershed & Air, Natural Resources

Information Systems, Recreation Management

Resources Management

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FS Participant ID	*Partner Participant ID	*First Name	*Last Name	Middle Initial	*Phone
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***Zip Code (of residence)**

***Email**

***Month/Year of Birth Age**

***Acknowledgment of Parental Consent for Minors *Sex**

***Race and Ethnicity 1**

Race and Ethnicity 2 Race and Ethnicity 3 Race and Ethnicity 4 Race and Ethnicity 5

Race and Ethnicity 6 Race and Ethnicity 7 Education Level Completed-1

Post-secondary Institution Name - 1 Post-secondary Institution Name - 2 Course of Study - 1

Course of Study - 2 *Military/Veteran Status Disability Status

AmeriCorps Status

Skills, Certifications, Competencies

FS Project ID

***Partner Project ID**

***Partner Name or SAM UEI Number**

***Project Title**

Description

Project Point of Contact Last Name

Project Point of Contact First Name Project Point of Contact Email Address

Federal Agency

***Agency Office (Forest Service Deputy Area)**

***Reporting Unit**

***Program**

***Fiscal Year *Start Date*End Date Remarks**

***Agreement Number**

***Legal Hire Authority**

FS Project ID FS Participant ID *Partner Project Id *Partner Participant ID

***Position Type**

***Functional Area (Type of Work)**

***Number of Hours/Project Hours Worked *Hiring Certificate Type**

***Hiring Certificate Status**

***Hiring Certificate Issue Date (MM/DD/YYYY)**

Narrative/Comments

***Resource Assistants Program**