

C-O-N-F-I-D-E-N-T-I-A-L

TRAINING REPORT

Weapons Training/Defensive Driving Course No. 2/72 4-8 October 1971
Date

TRAINEE: Piccolo, Joseph S.

OFFICE: WH

PURPOSE AND SCOPE OF COURSE:

The course provides basic proficiency training in the use of weapons for self-defense and in the techniques of defensive driving to counter vehicular kidnaping for Agency officers being assigned to hostile or unstable political and operational environments abroad.

ACHIEVEMENT RECORD:

This is to certify that Mr. Piccolo has satisfactorily completed the prescribed course of instruction.

FOR THE DIRECTOR OF TRAINING:

Joseph M. Hudacek
JOSEPH M. HUDACEK
Chief, Special Activities Branch

12 October 1971
Date

C-O-N-F-I-D-E-N-T-I-A-L

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				025658	
SECTION A			GENERAL		
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE
Piccolo, Joseph S.		12/08/35		M	GS-12 D
5. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer		DDP/WI/Branch 5		Rio de Janeiro	
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		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			23 June 1970 - 31 December 1970		
SECTION B			PERFORMANCE EVALUATION		
<p><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.</p> <p><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.</p> <p><u>P-Proficient</u> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><u>S-Strong</u> Performance is characterized by exceptional proficiency.</p> <p><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.</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 FI Chief, supervising one officer directly, several on a part-time basis, and one outside staffer.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Handles Station CP program; makes recruitment attempts, runs agents (including one of international importance).					S
SPECIFIC DUTY NO. 3					RATING LETTER
Coordinates FI/CP activities of the three Bases in Brazil.					S
SPECIFIC DUTY NO. 4					RATING LETTER
Handles funds and materials, and financial accountings.					S
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>Subject gets an "S" across the board for a solid performance.</p>			
<p>This rating officer has worked with Subject on a number of assignments over the past ten years. During this time he has risen from a very junior position to his present grade and responsibility due to steady, solid performance oriented towards operations; i.e. he gets out into the street to practice what he has learned.</p>			
<p>Only a few days before this report Subject was on-the-scene supervisor of a professionally conducted recruitment attempt. In such operations his experience against a hard target (PBRUMEN) has been evident.</p>			
<p>Subject is a good manager of JKLANCERS, including one on his first overseas tour, and indigenous agents, including one of considerable international access. He makes them all work on target. Under his supervision one of the Station's moderately useful agents has successfully been moved into the extremely important terrorist area. Subject uses imagination in his day-by-day work (and handles Station JMROD assignments).</p>			
<p>His handling of money and records and materials is impeccable.</p>			
<p>Both Subject and his wife mix well with their colleagues, and</p>			
SECTION D		CERTIFICATION AND COMMENTS (cont'd)	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
19 Jan. 1971	/s/ Joseph S. Piccolo		
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	
12 Jan. 1971	COS	David A. Phillips	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I agree with the evaluating officer's comments and would like to cite for emphasis the high degree of professionalism which characterizes Subject's attitude and performance.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
20 Jan. 1971	DCOS	David B. McGrath	

SECRET

14-00000

FITNESS REPORT - HOWARD A. TRECKLER

SECTION C (CONT'D)

enhance the LNCUFF image generally. Previously fluent in Spanish, Subject speaks Portuguese well after only a few months in Rio de Janeiro.

In short, Subject is a solid, professional officer, with his eye and his actions always on the target. He maintains his forward thrust within a framework of prudent judgment, and is maturely deliberate in deciding to take a risk. That's the name of the game.

It is requested that Subject's name be placed on the list of officers being considered for promotion.

Revised 11-10-68 SPB:pmg

Date of Report
19 May 1970

1 LANGUAGE TRAINING **SECRET** REPORT

Student Names
PICCOLO, JOSEPH S.

Offices
WHI

Courses
PORTUGUESE FULL-TIME

Inclusive Dates
01/05/70-04/23/70

Proficiency Level
(Before and After Training)

	Before	After
Speaking	--	4
Aural Comp.	--	4
Read Comp.	--	4

Instructors Estimate v. Official Test

Hours of Instruction
Scheduled 400 Actual 250
Absences 74

LANGUAGE TRAINING AIMS AND EVALUATION CRITERIA

The general aim of this course of study was to provide the student with a command of a foreign language in a skill and at the level set by the sponsoring office. Speaking, aural comprehension and reading comprehension, as required, were emphasized. Fluency and accuracy were given equal importance in training and in evaluation of the student. Cultural matters were covered only incidentally.

This student evaluation is based on (1) Instructor and Linguist observations; (2) regularly administered oral and written achievement tests; (3) a final comprehensive achievement examination. The achievement rating reflects only performance and achievement in the course and is conditioned by the length of time the student spent in training, achievement potential based upon his or her aptitude for language study and upon motivation. This rating should not be confused with the Proficiency Rating which is submitted separately on Form 1273, Certification of Language Proficiency.

PROGRESS IN ACHIEVING COURSE AIMS

(Overall) progress in the course is shown as unsatisfactory, marginal, satisfactory, above average, superior when compared against established standards for such training).

Speaking	Aural Comprehension	Reading Comprehension
ABOVE AVERAGE	ABOVE AVERAGE	ABOVE AVERAGE

PERFORMANCE EVALUATION

This student, with no experience in Portuguese, held his own extremely well in a class with three other students, all of whom had had previous training in the language.

He did especially well in pronunciation and soon succeeded unusually well in eliminating any interference from Spanish. Because of his knowledge of Spanish, the student's ability to read and understand is greater than his ability to speak.

His mastery of the course material was very good. His oral use of the language was generally limited to short sentences. In longer sentences he had a tendency to get lost in mistakes of syntax. He was almost always aware of his mistakes and would correct them himself, at the completion of a sentence. He always responded well to correction.

The areas in grammar presenting problems were 1) use of the subjunctive 2) a tendency to overlook, or sidestep, idiomatic expressions 3) failure to

See reverse side for additional comment

For the Director of Training:

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EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

Instructor

Department Chief
Language School/OTR

14-00000

use the preposition with certain verbs requiring the use of a preposition with dependent infinitives.

In my judgment, the student already has the ability to use the language effectively in basic, every-day situations. After a matter of months in the foreign environment he should be able to function effectively in all job-related situations. Because he was extremely diligent and conscientious, he would be an excellent candidate for further language training.

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
Blancio, Joseph S.		12/2/35	M	GS-12	D
6. OFFICIAL POSITION TITLE		7. OFFICE/BR OF ASSIGNMENT		8. CURRENT STATION	
Off. Officer		DDP, H/Release 6		Rio de Janeiro	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
CAREER	RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See Instructions - Section C)			ANNUAL	REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):		SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)			
		22 June 1970 - 31 December 1970			
SECTION B 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 C.				
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-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	Station FI Chief, supervising one officer directly, several on a part-time basis, and one outside staffer.				RATING LETTER S
SPECIFIC DUTY NO. 2	Handles Station CP program; makes recruitment attempts, runs agents (including one of international importance).				RATING LETTER S
SPECIFIC DUTY NO. 3	Coordinates FI/CP activities of the three Bases in Brazil.				RATING LETTER S
SPECIFIC DUTY NO. 4	Handles funds and materials, and financial accountings.				RATING LETTER 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 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 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.

Subject gets an "S" across the board for a solid performance.

This rating officer has worked with Subject on a number of assignments over the past ten years. During this time he has risen from a very junior position to his present grade and responsibility due to steady, solid performance oriented towards operations; i.e. he gets out into the street to practice what he has learned.

Only a few days before this report Subject was on-the-scene supervisor of a professionally conducted recruitment attempt. In such operations his experience against a hard target (PBRUMEN) has been evident.

Subject is a good manager of JELANCERS, including one on his first overseas tour, and indigenous agents, including one of considerable international access. He makes them all work on target. Under his supervision one of the Station's moderately useful agents has successfully been moved into the extremely important terrorist area. Subject uses imagination in his day-by-day work (and handles Station JMBOD assignments).

His handling of money and records and materials is impeccable.

Both Subject and his wife mix well with their colleagues, and

SECTION D

CERTIFICATION AND COMMENTS

(cont'd)

1.

BY EMPLOYEE

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

DATE

19 Jan. 1971

SIGNATURE OF EMPLOYEE

/s/ Joseph S. Piccolo

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

DATE

12 Jan. 1971

OFFICIAL TITLE OF SUPERVISOR

COS

TYPED OR PRINTED NAME AND SIGNATURE

David A. Phillips

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I agree with the evaluating officer's comments and would like to cite for emphasis the high degree of professionalism which characterizes Subject's attitude and performance.

DATE

20 Jan. 1971

OFFICIAL TITLE OF REVIEWING OFFICIAL

DCOS

TYPED OR PRINTED NAME AND SIGNATURE

David B. McGrath

SECRET

14-00000

FITNESS REPORT - HOWARD A. TRECKLER

SECTION C (CONT'D)

enhance the LNCUFF image generally. Previously fluent in Spanish, Subject speaks Portuguese well after only a few months in Rio de Janeiro.

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It is requested that Subject's name be placed on the list of officers being considered for promotion.

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				025658	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH (M, D, Y)		3. GRADE 5. SD
Piccolo, Joseph S.			12/08/35 M		GS-12 D
4. OFFICIAL POSITION TITLE			7. OFF. DIV. OR OF ASSIGNMENT		8. CURRENT STATION
Ops Officer			DDP/WH/COG		Headquarters
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 <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
CAREER-PROVINCIAL (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)		
January 1970			15 January 1969 - 31 December 1969		
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 1. Is responsible for providing Headquarters' guidance and support to WH/Miami and other Field Stations concerning on-island agent operations; corresponds with the Field.					RATING LETTER S
SPECIFIC DUTY NO. 2 2. Is Headquarters case officer handling several on-island agents.					RATING LETTER S
SPECIFIC DUTY NO. 3 3. Maintains liaison with Office of Communications, TSD, Security, Finance, Cover, and other Headquarters components.					RATING LETTER P
SPECIFIC DUTY NO. 4 4. Maintains liaison with the Navy (FOSG) and with the representative of MI-6 in Havana.					RATING LETTER P
SPECIFIC DUTY NO. 5 5. Prepares studies for the Division and the DDP concerning on-island collection activities.					RATING LETTER P
SPECIFIC DUTY NO. 6 6. Monitors developments in Cuba affecting the conduct of our on-island operations, especially developments involving the Cuban Department of State Security (DSK).					RATING LETTER P
SPECIFIC DUTY NO. 7 7. Supervises an intelligence assistant and a secretary.					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

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.

(This report is being written not by, but after consultation with, Subject's immediate supervisor, who is temporarily assigned elsewhere. The writer is one step removed from immediate supervision of Subject and has worked with him only since October 1969. In what follows, there is no difference of opinion between the supervisor and the writer, and statements not specifically attributed to one or the other represent the judgment and observation of both.)

Subject is an experienced officer whose primary field, on-island agents, is by definition difficult and frustrating and has recently become more so owing to developments beyond his control. Despite this situation he has continued to support successfully the most productive Cuban in-place FI agent that the Agency has.

The compromise of a major on-island operation during the reporting period was due not to any deficiency on Subject's part but rather to a general lack of Agency control over the operation from its inception. In any case, it is to Subject's credit that he wrote a candid and thorough analysis and damage report on the case (Writer).

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 30 Jan 1970	SIGNATURE OF EMPLOYEE <i>Joseph A. Piccolo</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION Pls see above	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 30 January 1970	OFFICIAL TITLE OF SUPERVISOR Chief, WII/COG/OPS	TYPED OR PRINTED NAME AND SIGNATURE <i>Glenn O. Brown</i> Glenn O. Brown
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL Based on 3 months experience in dealing with subject I have found him to be a thoroughly professional operations officer who shows good judgement and makes good use of his field experience in carrying out his function as COG's on-islands case officer. He performs with a minimum of supervision and is most perceptive in monitoring activities and events related to his area of activity. I believe Mr. Piccolo has considerable potential for moving up to more important positions.		
DATE 3 February 1970	OFFICIAL TITLE OF REVIEWING OFFICIAL Deputy Chief, WII/COG	TYPED OR PRINTED NAME AND SIGNATURE <i>Wenley L. Laybourne</i> Wenley L. Laybourne

SECRET

SECTION C

NARRATIVE COMMENTS

/continued/

Subject's in-house liaison has been effective, as has his liaison with the Navy FOSG (Supervisor). It does not appear that liaison with the representative of MI-6 in Havana for the exploitation of operational matters has been used to its fullest potential, although it should also be noted that this responsibility is not purely Subject's.

Subject appears to be a thoughtful and effective supervisor who is concerned with the further training and development of those under his supervision (Supervisor).

14-00000

SECRET

TECHNICAL SERVICES DIVISION -- TECHNICAL SCHOOL

SHORT RANGE AGENT CONTACT SURVEY (A-106)

Training Report

Name : PICCOLO, Joseph S.
Office: WH/COG
Date : 6 June 1969

1. OBJECTIVES:

To provide a general knowledge in:

- a. Selected gear used for clandestine short range agent contacts. Included are representative samples of:

One way RF radio devices; two way RF radio devices; two way carrier current devices; optical communicators; and special telephone devices used for establishing agent contact.

- b. The philosophy, purpose, considerations and manageability of short range agent contact systems; including message security, link security, reliability and feasibility of agent contact systems.

Lawrence H. Martin

INSTRUCTOR
TSD/TECHNICAL SCHOOL

SECRET

14-00000

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				025658	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) Piccolo Joseph S.			2. DATE OF BIRTH 12/08/35	3. SEX M	4. GRADE GS-12
5. OFFICIAL POSITION TITLE Ops Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/2	8. CURRENT STATION HANAGUA	
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) 27 Apr 68-15 January 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 Overall liaison responsibilities with the Office of National Security, with emphasis on guidance of the Special Unit. This was his principal duty during his service in Nicaragua and outweighs the other duties noted below. <i>DESI</i>					RATING LETTER S
SPECIFIC DUTY NO. 2 Processing into disseminable intelligence of raw reports produced by liaison; preparation of cables and operational dispatches. <i>DEZ1</i>					RATING LETTER P
SPECIFIC DUTY NO. 3 Handling of one FI operation (ERRATIC-5) and of other miscellaneous operational duties as assigned. <i>DE62</i>					RATING LETTER S
SPECIFIC DUTY NO. 4 Acting as Chief of Station in the absence of the COS.					RATING LETTER 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 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 must be described, if applicable.

This officer made excellent progress in working with the liaison service and was notable in his efforts to organize, train, and direct rather than simply sit back and accept the intelligence product. His liaison operation is the single most important operation of Station Managua and it could not have been in better hands. His working relationships with personnel of the liaison service were based on mutual friendship and respect and that service was sorry to see him leave as was the Station. He also earned the friendship and respect of his colleagues and cover facility personnel of all levels and had rare success in his dealings with administrative personnel of the cover facility, a most uncooperative lot.

It is difficult for the rating officer to stand back and be flatly objective about this fine employee who is a friend of many years standing and who impressed the rating officer years ago as an officer of rare potential. His tour in Managua was cut short by a personal tragedy (illness and death of a minor dependent) which set into motion a transfer which could not later be reversed. Despite the pressures of this tragedy, this employee performed at a high level throughout this service in Managua and both he and his charming wife proved outstanding examples of "true grit." His tour in Managua proved him once again to be a mature, competent professional who should be able to advance to high positions in the organization. He accepts responsibility well--acted without hesitation.

(continued)

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	
11 Feb 1969	<i>Joseph D. Piccolo</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
9 months	Employee left PCS prior to preparation of report. Should be shown to him at Headquarters.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
15 January 1969	Chief of Station	/s/ Robert T. Shaw
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I concur with the rating officer's evaluation of Mr. Piccolo.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
11 Feb 1969	C/WII/2	<i>Edwin M. Terrell</i> Edwin M. Terrell

SECRET

14-00000

S-E-C-R-E-T

SECTION C, continued

(when serving as Acting Chief of Station during the COS' absence on home leave. He has rare ability to see the relevant and has the courage of his convictions--will argue a point. Physically slow moving--given to ambling like a tired old bear--he can be quite deceiving in an age which seems to specialize in rapidly moving young men-on-the-go. There is no wheel spinning about this officer and no sham. He has his eye on the future and moves along relentlessly in that direction. Obstacles bother him but don't deter him. He is in short a steady, dependable man with forward momentum.

One area in which he could use some improvement is in his writing. This has been discussed with him. The rating officer has recommended that he take a course in effective written English. His writing is at times vague and convoluted.

His fine performance was rewarded in September 1968 with a much-merited grade promotion so he cannot be recommended for promotion at this time. It is recommended, however, that he be given a position with head room to allow for advancement to higher grade as soon as he is eligible. The rating officer would be pleased to serve with this officer at any time, any place.

S-E-C-R-E-T

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				025658	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE
Piccolo, Joseph S.			12/8/35	M	GS-11
5. OFFICIAL POSITION TITLE			7. OFFICE OR OF ASSIGNMENT	8. CURRENT STATION	
Ops Officer			WH/1	Mexico City	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
XX 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)			XX ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYER <input type="checkbox"/>		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			May 1966 - 30 October 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
Agent handling and exploitation. Acts as case officer for a variety of operations including a double agent operation.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Administrative management of project activities.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Operational planning (target analysis etc.)					S
SPECIFIC DUTY NO. 4					RATING LETTER
Programming and handling of covert action activities.					S
SPECIFIC DUTY NO. 5					RATING LETTER
Reporting and processing of intelligence information					P
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 explanation, 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.

This young case officer has displayed considerable professionalism after only a relatively short time in the clandestine operations field. He is very versatile and resourceful and has shown a high amount of initiative. He is at his best as an agent handler and has developed close relationship with the assets entrusted to him. He has been helped in this by a high degree of fluency in Spanish and his pleasant personality. His reporting, particularly his caliber writing still leave room for improvement, but on the whole, this officer has been one of the mainstays of the PBRUMEN Section during his tour, which unfortunately has been marred by poor health.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 30 Nov 67	SIGNATURE [Redacted] /s/ Joseph S. Piccolo	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 16 months	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 30 Nov. 1967	OFFICIAL TITLE OF SUPERVISOR Ops Officer	TYPED OR PRINTED NAME AND SIGNATURE Francis Sherry
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL I fully concur with the comments of the rating officer. Subject is an excellent case officer suitable for assignment either outside or under official cover. He needs further training in written staff work, however, and at a convenient moment in his career would benefit greatly from intensive training in reports writing, rapid reading, and related subjects.		
DATE 30 Nov. 1967	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief of Station	TYPED OR PRINTED NAME AND SIGNATURE Winaton D. Miller

SECRET

S-E-C-R-E-T

Training Report

Field Finance and Logistics Course No. 5 -68 18 March - 5 April 1968
(Three Weeks, full time) 120 hours (date)

Student : Piecele, Joseph

Year of birth: 1935

Office

: WH

Grade : GS-11

Service Designation

: D

EOD Date : 0862

Number of Students - Logistics: 22

Finance : 16

COURSE OBJECTIVES

The principal objective of this course is to prepare students for logistics and finance responsibilities at Class B or C and Type II or III field stations. The course familiarizes students with techniques, regulations, and procedures as they pertain to finance, logistics, foreign travel, personnel and physical security at a field station. Emphasis is placed on practical applications; therefore, students concentrate on preparing and maintaining Station financial and property records, preparing foreign travel vouchers, preparing personnel documentation and the changing of safe combinations and the repair of simple safe malfunctions. The course covers (1) Finance: the budgetary process, covert currency funding, cash controls, advances, accountings, voucher preparation, financial management of projects, and allotment and cost control. (2) Logistics: authorities, classifications, and controls as they pertain to acquisition, use, transfer, and disposal of materiel; real estate and vehicles; property accounting procedures; shipment and storage of personal effects; and reporting to Headquarters. (3) Travel: regulatory authorities and limitations, computation of per diem, and travel voucher preparation and procedures for both TDY and ICS travel. (4) Personnel: regulatory procedures covering contract personnel, leave, overseas medical benefits; the use and preparation of field duty status reports, integrate settlement sheets, field reassignment questionnaires, personnel clearance and transfer sheets and fitness reports. (5) Security: acquaintance with overseas safekeeping equipment; emergency destruction procedures and materials.

S-E-C-R-E-T

S-E-C-R-E-T

ACHIEVEMENT RECORD

Testing includes three practical problem tests. (1) The Finance Test Problem involves maintaining a set of Class B Records for a period of one month. (2) The Logistics Test Problem requires the maintenance of a set of Type II property records covering a year's transactions. (3) The Travel Test Problem involves solution of a travel problem including preparation of a travel voucher. A test covering the proficiency level attained in Personnel and Security is not given.

Grades are given in accordance with the fitness report system.
(Weak, Adequate, Proficient, Strong, and Outstanding)

TEST RESULTS:

Finance: Maintenance of Class B and C Station Cash Journals and Subsidiary Records	S
Logistics: Maintenance of Type II Accounting Stations Documentation, Registers, and Stock Records	O
Travel Test: Preparation of a TDY travel voucher and the computation of per diem.	P

NARRATIVE COMMENTS:

Mr. Piccolo had difficulty in the computation of per diem. If his future duties will include responsibility for travel, I suggest that additional instruction in per diem computation be given him.

FOR THE DIRECTOR OF TRAINING:

John W. Field

 John W. Field
 Instructor

S-E-C-R-E-T

2000

2000

2000

2000

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				025658 ✓	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) PICCOLO Joseph S.			2. DATE OF BIRTH 10-22-38	3. SEX M	4. GRADE GS-10
5. OFFICIAL POSITION TITLE Ops Officer			7. OFF/DIV OR OF ASSIGNMENT DDP/WH-1		8. CURRENT STATION Wash DC
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 type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) June 1966 to September 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 Agent handling and exploitation. Serves as case officer to a variety of agents including one double agent					RATING LETTER O
SPECIFIC DUTY NO. 2 Administrative management of project activities including accounting, funding, etc.					RATING LETTER A
SPECIFIC DUTY NO. 3 Operational reporting, including contact reports, operational progress reports, etc.					RATING LETTER P
SPECIFIC DUTY NO. 4 Reporting and dissemination of intelligence information					RATING LETTER S
SPECIFIC DUTY NO. 5 Target analysis; preparation and implementation of plans for new operations					RATING LETTER P
SPECIFIC DUTY NO. 6 Conception and initiation of covert action programs in support of U.S. operations					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

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.

SEP 28 3 30 PM '66
This employee has continued to perform in the manner described in detail under this section in the last fitness report prepared by the same rating officer (May 1966). He has had to assume an even heavier work load owing to the imminent transfer of his supervisor whose Special Agent assets have of necessity been turned over to this employee. His health has not improved as expected and it is felt that he should be sent to HOLADY for a complete medical check-up as soon as he can be spared for the time required.

Once again, it is recommended that this officer be promoted as soon as possible to GS-11.

SECTION D

CERTIFICATION AND COMMENTS

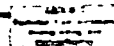
1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
9 September 1966	/s/ Joseph S. Piccolo	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 4 months TDY 11 months PCS	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
9 September 1966	Ops Officer XXXXXXXXXXXXXX	/s/ Robert T. Shaw
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
The Reviewing Officer agrees with the Ratings and the Comments of the Supervisor of this officer which are reflected in this Fitness Report.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
	Chief of Station	/s/ Winston Scott

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				025658	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) PICCOLO, Joseph S.			2. DATE OF BIRTH 12/8/35	3. SEX M	4. GRADE 5. SD GS-10 D
6. OFFICIAL POSITION TITLE Ops Officer			7. OFF/DIV/BR OF ASSIGNMENT 8. CURRENT STATION DDP/WH/1 Mexico City		
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"/> CAREER-PROVISIONAL (See instructions - Section C) SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input checked="" type="checkbox"/> SPECIAL (Specify): To support promotion req.		
11. DATE REPORT DUE IN O.P. 1 June 1966			12. REPORTING PERIOD (From - to) October 1965 to May 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 Agent handling and exploitation. Serves as case officer to a variety of agents including one double agent.					RATING LETTER O
SPECIFIC DUTY NO. 2 Administrative management of project activities including accountings, funding, etc.					RATING LETTER S
SPECIFIC DUTY NO. 3 Operational reporting, including contact reports, operational progress reports, etc.					RATING LETTER S
SPECIFIC DUTY NO. 4 Reporting and dissemination of intelligence information.					RATING LETTER S
SPECIFIC DUTY NO. 5 Target analysis and preparation of plans for mounting new operations.					RATING LETTER P
SPECIFIC DUTY NO. 6 Conception and initiation of covert action programs in support of FI/CI operations.					RATING LETTER O
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

27 MAY 1966



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 and 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 employee has turned in a consistently fine performance since his assignment to Mexico City. Every going operation assigned to him has shown marked improvement under his tutelage, most notably the PERUMEN refugee Marine operation which has finally developed into a highly productive enterprise under the guidance of this officer. He is handling a sensitive PERUMEN double agent case in a most professional manner. His operational reporting is exemplary and his writing style, once somewhat obtuse, has shown steady improvement. Despite a relatively short period in the role of field case officer, he has won the admiration and respect of colleagues and agent assets alike. He has a winning way with people - a reflection of his sincere interest in them. He has a high degree of initiative and drive, is imaginative and resourceful. In operations he shows a welcome degree of aggressiveness. His supervisory ability, except as exercised indirectly through others, has not yet been sufficiently put to the test to enable the rating officer to make a determination, but it appears that he already possesses the essentials of a good supervisor. He has had some health problems in Mexico but in spite of these has not let up in any way in his work. Indeed, one wonders what he would be capable of if he were in perfect health given the high level of performance to date.</p> <p>It is a pleasure for the rating officer to go on record as stating that never in his 18 plus years with the organization has he had the pleasure of serving with a more promising young case officer.</p> <p>It is recommended that he be promoted to GS-11 as soon as eligible.</p> <p>In addition to the period covered by this report (Oct 65-May 66) this employee served at the Mexico City Station in TDY status from April 65 to Aug. 65. His performance time was also taken under certification and comments.</p>			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
12 May 1966	/s/ Joseph S. Piccolo		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
4 months TDY 7 months PCS			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
12 May 1966	Ops Officer	/s/ Robert T. Shaw	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>The reviewing officer concurs in the comments of the rater. I have observed this officer closely during his tour at the Station. He has largely overcome a tendency to freewheel somewhat and shows an increasing willingness to accept guidance from more experienced officers. Compared with other officers of the same grade at this Station, it is my belief that his overall performance should be rated O rather than S.</p> <p>In the Station's view he is a young officer who should advance steadily and with more experience should be able to handle a demanding deep cover assignment.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
12 May 1966	Deputy Chief of Station	/s/ Alan P. White	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				025658	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) PICCOLO, Joseph S.			2. DATE OF BIRTH 6 December 35	3. SEX M	4. GRADE GS-10
5. OFFICIAL POSITION TITLE Ops Officer			6. OFF DIV/BN OF ASSIGNMENT DDP/WH/3uba		
7. CHECK (X) TYPE OF APPOINTMENT			8. CURRENT STATION Headquarters		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			9. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):		
10. DATE REPORT DUE IN O.P.			11. REPORTING PERIOD (From - to) 16 Mar 65 - 30 Sept 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
Please note other side					
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 S
15 DEC 1965					

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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

Dispatch HMMT - 5685 dated 13 August 1965 from COS - Mexico City

" In view of the fact that Subject's recent surveillance work at Mexico Station was done while he was on TDY, this Station is not in a position to prepare a fitness report covering Subject's performance for the period. Since he was absent from Headquarters, it is felt that he might possibly not be credited for his fine work unless the Station expresses its views.

" Subject plunged into work with the PERUMEN Section immediately upon arrival and was given a wide variety of assignments ranging from surveillances on a rainy street at 4:00 a.m. to the preparation of operational reviews. He was given a number of existing agent assets to handle with a minimum of overlap with the previous case officer. He performed very well in every instance. He is able, enthusiastic, and capable of carrying a large work load. His colleagues in the office and his agents and contacts outside found him a pleasure to work with. The only weakness noted during his TDY assignment was in his written work--a tendency to be unclear -- but this is something the Station is certain he can work out satisfactorily and it is not a serious shortcoming."

Mr. Piccolo returned to Mexico City PCS 29 Sept 1965

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	
	Employee had left the Station and will be shown report upon his return to Hqs.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
13 August 1965	COS, Mexico City	Winston M. Scott /s/
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
13 August 1965	COS	Winston M. Scott /s/

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				025658	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
PICCOLO Joseph S.			8 Dec 35	M	G3-09 SJ
6. OFFICIAL POSITION TITLE			7. OFF/DIV/RR OF ASSIGNMENT 8. CURRENT STATION		
Ops Officer			DDP/WH/C/RR/OS Washington, D. C.		
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"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 October 1964 - 15 March 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 Operations officer for handling communications training of a double agent.					RATING LETTER S
SPECIFIC DUTY NO. 2 Operations officer handling a Cuban intelligence service defector being utilized in recruitment operations.					RATING LETTER S
SPECIFIC DUTY NO. 3 Operations officer assisting in handling and debriefing a Cuban intelligence service defector.					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
20 MAR 1965					

SECRET

(When Filled In)

NARRATIVE COMMENTS FILE OF PERSONNEL

SECTION C

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 and supervisory duties must be described, if applicable.

Mr. Piccolo is an energetic, capable, all-around officer with a flair for operations and a great deal of common sense. He reacts correctly and instinctively when operational problems arise. His agent handling has been superior. He has a good knowledge of tradecraft and also understands records management. Although young, he is mature and self-reliant, needing little supervision.

Mr. Piccolo's promotion is being recommended in a separate memorandum.

Mr. Piccolo is cost conscious and effective in the use of space, equipment and funds. He does not hold a supervisory position.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 23 Mar 65	SIGNATURE OF EMPLOYEE <i>Harold F. Swenson</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 18 months	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 23 III 65	OFFICIAL TITLE OF SUPERVISOR C/WH/SA/CI (WH/C/SP)	TYPED OR PRINTED NAME AND SIGNATURE <i>Harold F. Swenson</i> Harold F. Swenson
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL Concur in rating of Supervisor.		
DATE 24 March 1965	OFFICIAL TITLE OF REVIEWING OFFICIAL Asst. Deputy Chief, WH/C	TYPED OR PRINTED NAME AND SIGNATURE <i>John T. Flynn</i> John T. Flynn

SECRET

CONFIDENTIAL

17 August 1964

MEMORANDUM FOR: Chief, Western Hemisphere Division, DD/P

ATTENTION : Administrative Officer

FROM : Chief, Junior Officer Training Program

SUBJECT : Trial Attachment of Junior Officer Trainee
Joseph S. Piccolo for on-the-job training

1. This memorandum confirms the attachment of Subject for on-the-job training in your Division as the second phase of the JOT Program undertaken with your cooperation.

2. The purposes of this trial attachment are:

a. To test his abilities in the practical application of his formal training;

b. To evaluate his potential and suitability for permanent assignment;

c. To train him for a specific assignment appropriate to his aptitudes and development;

d. To stimulate his motivation for a career in the Agency.

3. The attachment for six months effective 13 July 1964 can be adjusted by mutual consent according to circumstances or need for additional training. It is especially important that the Chief/JOTP be notified immediately if the trainee is not appropriately placed or is not effective in his work.

4. The JOT has been fully informed of the significance of this trial period in his career development.

5. Details of administrative procedures are attached.

FOR THE DIRECTOR OF TRAINING

R. B. Freeman

ROBERT B. FREEMAN

Attachment
Distribution:

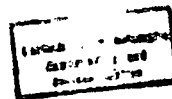
1 - Addressee w/att.

1 - C/CSFD w/att.

1 - O/Pers. Official Files w/att.

1 - JOT Piccolo w/att.

CONFIDENTIAL



C O N F I D E N T I A L

DETAILS FOR ADMINISTRATION OF ATTACHED JOT'S

For Supervisor:

1. The office or division will maintain time and attendance records during the period of this attachment.
2. Overtime can be authorized only after supervisor has checked with the JOT tracking officer. OTR will be reimbursed by division or office for overtime payments. The TSA clerk should report to JOTF at the end of each pay period any overtime worked by a JOT.
3. Any security violations by this JOT will be handled in the manner that is appropriate to the division or staff. Chief/JOTF will be notified in this event.
4. Supervisors will execute any fitness reports covering the period of this attachment. Chief/JOTF will countersign such reports.
5. Supervisors will provide job performance data to the Chief/JOTF when the JOT enters a promotion zone of consideration.
6. JOTF is located in Room 743, Scoville Building, Extension 3261. Any questions should be addressed to Mr. JOHN GERRY.
7. It is requested that each supervisor submit a progress report after three months of attachment. In the event of rotational assignments within a division where supervisors change, a progress report should be submitted at the end of each phase of the rotation.

For JOT:

8. Any leave will be worked out with the supervisor and if approved must be communicated by telephone to the JOTF office. See paragraph (1) above.
9. The JOT will furnish Chief/JOTF with a progress report after the first month of attachment and every two months thereafter. Items desired include:
 - a. Description of activities
 - b. Plans for next reporting period
 - c. Names and titles of supervisors
 - d. Assessment of value of present experience
 - e. Any constructive suggestions

These reports should be routed to Chief/JOTF via the supervisor.

10. The JOT will advise this office of his room number and extension and name of his supervisor as soon as possible after attachment.

GROUP 1

Excluded from automatic

downgrading and

declassification

8.12.00

C O N F I D E N T I A L

14-00000

CONFIDENTIAL

11 August 1964

MEMORANDUM FOR: Chief, Western Europe Division, DIVP

ATTENTION : Administrative Officer

FROM : Chief, Junior Officer Training Program

SUBJECT : Trial Attachment of Junior Officer Trainee
Joseph S. Piccolo for on-the-job training

1. This memorandum confirms the attachment of Subject for on-the-job training in your Division as the second phase of the JOT Program undertaken with your cooperation.

2. The purposes of this trial attachment are:

a. To test his abilities in the practical application of his formal training;

b. To evaluate his potential and suitability for permanent assignment;

c. To train him for a specific assignment appropriate to his aptitudes and development;

d. To stimulate his motivation for a career in the Agency.

3. The attachment for six months effective 13 July 1964 can be adjusted by mutual consent according to circumstances or need for additional training. It is especially important that the Chief/JOTP be notified immediately if the trainee is not appropriately placed or is not effective in his work.

4. The JOT has been fully informed of the significance of this trial period in his career development.

5. Details of administrative procedures are attached.

FOR THE DIRECTOR OF TRAINING

R. B. Freeman

ROBERT B. FREEMAN

Attachment

Distribution:

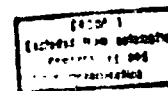
1 - Addressee w/att.

1 - JOT Piccolo whft.

1 - C/NSPD w/att.

1 - O/Pers. Official Files w/att.

CONFIDENTIAL



CONFIDENTIAL

DETAILS FOR ADMINISTRATIVE ATTACHMENT JOIPFor Supervisors:

1. The office or division will maintain time and attendance records during the period of this attachment.
2. Overtime can be authorized only after supervisor has checked with the JOT Training Officer. OTR will be reimbursed by division or office for overtime payments. The T&A clerk should report to JOIP at the end of each pay period any overtime worked by a JOI.
3. Any security violations by this JOI will be handled in the manner that is appropriate to the division or staff. Chief/JOIP will be notified in this event.
4. Supervisors will execute any fitness reports covering the period of this attachment. Chief/JOIP will countersign such reports.
5. Supervisors will provide job performance data to the Chief/JOIP when the JOI enters a promotion zone of consideration.
6. JOIP is located in Room 743, Brophy Building, Extension 3261. Any questions should be addressed to Mr. JOHN GERRY.
7. It is requested that each supervisor submit a progress report after three months of attachment. In the event of rotational assignments within a division where supervisors change, a progress report should be submitted at the end of each phase of the rotation.

For JOI:

8. Any leave will be worked out with the supervisor and if approved must be communicated by telephone to the JOIP office. See paragraph (1) above.
9. The JOI will furnish Chief/JOIP with a progress report after the first month of attachment and every two months thereafter. Items desired include:
 - a. Description of activities
 - b. Plans for next reporting period
 - c. Names and titles of supervisors
 - d. Assessment of value of present experience
 - e. Any constructive suggestions

These reports should be routed to Chief/JOIP via the supervisor

10. The JOI will advise this office of his room number and extension and name of his supervisor as soon as possible after attachment.

GROUP 1
Excluded from automatic
downgrading and
declassification

7/23/64

CONFIDENTIAL

S-E-C-R-E-T

OFFICE OF TRAININGTRAINING REPORT
OPERATIONS COURSESECTION AGENERALOperations Course No. 17
(720 hours, full-time)9 March - 10 July 1964
(Date)

Student	: PICCOLO, Joseph S.	Office	: OTR/JOTP
Year of Birth:	1935	Service Designation:	SJ
Grade	: GS-08	Number of Students :	54 began
EOD Date	: February 1957		53 finished

SECTION BPERFORMANCE EVALUATION

W - Weak	Ranges from inadequate to less than satisfactory (in terms of a new and inexperienced case officer).
A - Adequate	Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.
P - Proficient	More than satisfactory. Has acquired a solid beginner's proficiency. This rating may be interpreted as representing "average" on our rating scale.
S - Strong	Exceptional proficiency, characterized by thoroughness, initiative, originality, and an exceptional student understanding of the case officer role in clandestine operations.
O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of other students doing similar work as to warrant special recognition.

S-E-C-R-E-T

C-E-C-R-E-T

SKILLSRATING LETTER

1. Agent acquisition (spotting, development, assessment, understanding and use of motivation, recruitment).
2. Agent handling (building and maintaining rapport, establishing control, elicitation, briefing, debriefing, training).
3. Operational security (cover, compartmentation, clandestine communications).
4. Intelligence sense (recognition of information of intelligence value, differentiation between fact and opinion, separation of intelligence information from operational information, alertness to leads).
5. Intelligence reporting (disseminability of FIR's and intelligence cables, authentication of information).
6. Operational reporting (contact reports, cables, dispatches).

PSPSPPGENERAL FAMILIARIZATION

1. Foreign Intelligence Collection Programs.
2. Covert Action Programs.

PP

The student also received general instruction by presentations, discussion of cases, reading and some practical application in Counter-intelligence programs and procedures. He was also given general familiarization in operational photography and the operation of basic audio-surveillance equipment, and heard short presentations on secret writing, surreptitious entry and covert entry of envelopes. Other areas of general familiarization included Counterinsurgency, paramilitary activity, and general operational administration and support.

OVERALL PERFORMANCE

Letter in rating box corresponds to the statement which most accurately reflects the student's level of performance, and takes into account everything about him which influenced his effectiveness.

This rating is a reflection of the degree to which the instructors feel that the student is both suitable and competent for overseas service in the Clandestine Services.

P

S-E-C-R-E-T

SECTION CNARRATIVE COMMENTS

Significant strengths and weaknesses and their relationship to overall performance in the Operations Course. This section amplifies and explains, as necessary, the rating letters given above.

Mr. Piccolo's performance throughout the course seldom deviated from the "Proficient" level. His strongest showings were frequently in areas where he used knowledge gained from previous Agency experience together with his natural ability to get along with people in face-to-face situations. He excelled in agent handling because he made an extra effort to establish and maintain rapport, was competent in solving operational administration and support matters with a minimum of guidance, and was imaginative in devising cover and in establishing clandestine communications. Shortcomings, however, arose in other areas because he occasionally relied too much on his ability to improvise, rather than to spend extra time in analyzing, planning and otherwise preparing for agent meetings.

Mr. Piccolo easily recognized leads of operational or intelligence value, and as the course progressed, displayed marked improvement in his writing of cables, dispatches and reports.

Mr. Piccolo acquired a more than satisfactory knowledge of the principles and techniques taught during the course.

FOR THE DIRECTOR OF TRAINING:

Edward J. Treacher
Chief Instructor

24 July 1964
Date

S-E-C-R-E-T

OPERATIONS COURSE NO. 17

9 March 1964 - 10 July 1964

		<u>Number attending course: 54</u>				
<u>RATING</u>		<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>0</u>
OVERALL:		0	5	32	16	1
<u>Skills</u>						
1. Agent Acquisition:		0	5	30	17	2
2. Agent Handling:		0	7	25	13	4
3. Operational Security:		0	1	34	19	0
4. Intelligence Sense:		0	3	24	23	4
5. Intelligence Reporting:		0	3	33	11	4
6. Operational Reporting:		0	6	25	21	2
<u>General Familiarization</u>						
1. Foreign Intelligence:		0	5	33	13	0
2. Covert Action:		0	5	39	9	1

S-E-C-R-E-T

SEE FORM 45
(When Filled In)

JOE TRAINING REPORT

SUBMITTED AS INITIAL FITNESS REPORT IN LIEU OF FORM 45

1. NAME OF JOT - (LAST)	(FIRST)	(MIDDLE)	GRADE	EMPLOYEE SERIAL NO.
PICCOLO,	Joseph	S.	GS-08	025658
2. DATE REPORT DUE IN O.P.		REPORTING PERIOD		
7/31/64		1/6/64 TO 6/30/64		
3. This Junior Officer Trainee has been engaged in course of the Integrated Program with intensive training in Clandestine Operations.				
Detailed evaluations of his performance in each phase are contained in his Official Personnel Folder. Definition of the rating letter corresponds to that in Section B, Fitness Report Form 45 (4-62).				
OVERALL PERFORMANCE IN INTEGRATED PROGRAM				P

4. COMMENT AND PERTINENT OBSERVATIONS:

During his training, Mr. Piccolo has acquired a good knowledge of the principles and techniques of clandestine operations. He has demonstrated a good intelligence sense and a particular ability for handling agents.

He has had no supervisory responsibilities yet, and he appears to be cost-conscious as far as the undersigned can judge.

DATE 14 August 1964 BY

20 AUG 1964

John Gerry
John Gerry
TRAINING OFFICER/JOTP
S-1 C-8 P-1

S-E-C-R-E-T

PERFORMANCE RECORD

International Communism - Challenge and Response

JOT Class 10 February - 6 March 1964Course Description

A. Statement of Objectives.

1. To develop a familiarization with the doctrine, organization and tactics of International Communism as represented by the Communist parties and organizations in the free world; and in addition, to make the student aware of the capabilities, methods and problems of the Soviet Union and China.
2. To develop an understanding of the challenges facing the United States and the free world from the objectives, activities and capabilities of International Communism; and to assist the student to articulate the U.S. position at home and abroad to meet these challenges.

B. Course Method

1. Approximately one-half of the course is devoted to lectures, one-fourth to seminars, exercises and demonstrations, and one-fourth to individual study.
2. Student achievement is judged on the basis of performance in two written examinations and participation in seminars, and exercises.

Name: Piccolo, JosephWritten Work1st Examination: Doctrine, CP Organization & USSR 67 Proficient2nd Examination: China, CP Activities 59 ProficientOver-all Written Work ProficientOral WorkSeminars, Exercises StrongComment:

GROUP I

S-E-C R-E-T Excluded from automatic
downgrading and
declassification

14-00000

S E C R E T

TRAINING REPORT

Introduction to the Clandestine Services (JOT Program) 3 - 7 February 1964

Student : Joseph S. Piccolo

Year of Birth: 1935

Office : JOTP

Grade : GS-08

Service Designation: SJ

ROD Date : February 1957

No. of Students : 36

OBJECTIVES AND CONTENT

The purpose of this five day bloc of instruction is to acquaint the Junior Officer Trainee with the general organization and functions of the Clandestine Services. This orientation takes place during the preliminary phase of the JOT Program at Headquarters. It consists of lectures by representatives of major components of the Clandestine Services and discussion periods and is presented to assist the JOT in making his choice of considering a career in the Clandestine Services. This instruction also serves as an introduction to the subsequent training program at ISOLATION.

ACHIEVEMENT RECORD

This is a certificate of attendance. No record was made of individual performance in the course.

FOR THE DIRECTOR OF TRAINING:

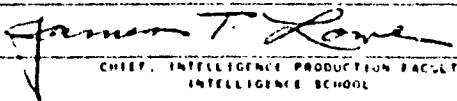
Thomas E. Kelly
Chief Instructor

11 FEB 1964
Date

S E C R E T

SECRET

(When Filled In)

TRAINING REPORT INTELLIGENCE TECHNIQUES COURSE (120 Hours)				COURSE NO. 21	NO. STUDENTS 37	DATE OF COURSE 13 - 31 Jan 1964	
IDENTIFYING INFORMATION							
NAME OF STUDENT	YOB	EOB DATE	OFFICE	GS	SD		
PICCOLO, Joseph S.	1935	February 1957	JOTP	08	SJ		
KEY TO RATINGS							
W - Weak		Ranges from inadequate to less than satisfactory.					
A - Adequate		Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.					
P - Proficient		More than satisfactory. Has acquired a solid beginner's proficiency.					
S - Strong		Exceptional proficiency. Characterized by thoroughness, initiative, originality, and an exceptional student understanding of the work involved in intelligence production.					
O - Outstanding		Performance is so exceptional in relation to requirements and in comparison to the performance of others doing similar work as to warrant special recognition.					
EVALUATION OF PERFORMANCE ² IN SKILLS							
BRIEFING	RATING	WRITING	RATING	ANALYSIS	RATING		
	P		A		P		
OVER-ALL PERFORMANCE EVALUATION							
The RATING LETTER reflects the over-all performance of the student in the course and is thus a measure of the extent to which the student possesses the skills and techniques required in the production of finished intelligence. The rating is not necessarily arrived at by mathematically averaging the in skills ratings, but takes into consideration any outstanding strengths or weaknesses that should be reflected in an evaluation of the performance of the student as a whole. The RATING LETTER is a consensus of the view of the faculty.						RATING	
						P	
REPORT OF OBSERVATIONS, JUDGMENTS AND IMPRESSIONS							
This is a general, unspecific, narrative report of observations, judgments, and impressions. It includes intangible factors such as the student's attitude, cooperativeness, attentiveness, maturity, and judgment. It also includes the general impression the student has made on the faculty. This report will not be included unless the instructors believe that it would add something to the previous evaluation of performance in skills as well as to the evaluation of the OVER-ALL PERFORMANCE of the student.							
FOR THE DIRECTOR OF TRAINING:				 CHIEF, INTELLIGENCE PRODUCTION FACULTY INTELLIGENCE SCHOOL		DATE 5 Feb 64	

JOT INTEGRATED PROGRAM
(CLASS OF JANUARY 1964)

Introduction to Intelligence
(40 hours, full-time)

6 - 10 January 1964

Student : PICCOLO, Joseph S.

Office : 642

Year of Birth: 1935

Service Designation: 3J

Grade : GS-08

Number of Students : 75

EOD : February 1957

COURSE OBJECTIVES - CONTENT AND METHODS

In the Introductory phase of the JOT Integrated Training Program the course objectives are: (1) to instruct the student in the basic concepts of Intelligence and the role of national intelligence within the Government; (2) to describe the Intelligence community; its members, their duties, and their relationship to CIA; (3) to define and describe the functions of CIA and identify the components performing them; and (4) to explain the processes and means by which CIA fulfills its responsibilities for collection, production, and dissemination of Intelligence.

Instructional techniques include lectures given by Orientation Faculty members, guest speakers, seminars, reading, review exercises and training films.

ACHIEVEMENT RECORD

Evaluation is based on a 40 question multiple choice test. The numbers placed in the columns below show how many students received each rating. This student's rating is indicated by the asterisk.

<u>Satisfactory</u>	<u>Excellent</u>
28	47 *

FOR THE DIRECTOR OF TRAINING:

J. B. Snyder
Chief, Orientation Faculty

21 Jan 64
100

CLASSIFIED
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

5-1-C-R-1

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 025658	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) PICOLO Joseph S.			2. DATE OF BIRTH 8 Dec. 1935	3. SEX Male	4. GRADE / 5. SD GS-7 D
6. OFFICIAL POSITION TITLE Intel Assistant			7. OFF/DIV/BR OF ASSIGNMENT DDP/TFW/CI		8. CURRENT STATION Washington, D. C.
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"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) September 1962 - 18 January 1963		
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 Supervises Correspondence Routing-Control Section of Branch					RATING LETTER O
SPECIFIC DUTY NO. 2 Develops, implements, and manages Branch systems for mail routing-control, files and a Special Project.					RATING LETTER S
SPECIFIC DUTY NO. 3 Prepares dispatches and cables for transmission to the field, assists in preparing CI disseminations to other government agencies.					RATING LETTER S
SPECIFIC DUTY NO. 4 Runs name traces and prepares summaries of information on personalities.					RATING LETTER O
SPECIFIC DUTY NO. 5 Other duties as assigned.					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	
<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 must be described, if applicable.</u></p> <p>Employee returned to duty with the Agency in September 1962 after completing a tour of military duty. At that time he was assigned to TFW/CI. Although employee expressed a desire to work in operations at that time, he agreed to perform the duties outlined in Section B. He was called upon to perform these duties because of the dire need within TFW/CI for someone with his talents to establish and manage Branch systems for mail routing-control and files. Employee was promised an operational assignment as soon as the systems were established and functioning in an orderly and efficient manner. Employee has performed his duties exceptionally well and has established systems for mail routing-control, and files for the Branch which are functioning well. It is strongly recommended that this employee be assigned to duties of an operational nature and relieved from his present duties as soon as possible. Employee has the capability of assuming more and greater responsibility.</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		
	<i>Joseph D. Pissin</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
5 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPE OR PRINTED NAME AND SIGNATURE	
20 February 63	C/TFW/CI	<i>Victor Wallen</i> VICTOR WALLEN	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
This employee gives promise of continued professional growth.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	SIGNATURE OF REVIEWING OFFICIAL	
21 February 1963	Deputy Chief, SAS	<i>Bruce D. Choever</i> Bruce D. Choever	

SECRET

CONFIDENTIAL
(When Filled In)

FOREIGN LANGUAGE APTITUDE AND EXPERIENCE REPORT				DATE OF TESTING	
NAME			OFFICE		GRADE
SEX					
<p>The category checked below is an interpretation of the scores made by the person named above on a battery of foreign language aptitude tests. The relationships between test performance and subsequent training performance of trainees in Agency language training courses are indicated by the graphs next to the aptitude categories. The graphs to the left are for women and the graphs to the right are for men. From these graphs you can read for each aptitude category the probability that a person in that category will perform in an Agency foreign language training course at an average or better-than-average level. For example, 22 percent of the women who obtain an aptitude rating of "8" can be expected to be average or better in course performance, while 5 percent of the men with ratings of "8" can be expected to be average or better in course performance. A man needs an aptitude rating of "6" to have about the same expectation of success in language training as a woman with a rating of "8." At the other end of the scale, 80 percent of either men or women who obtain aptitude ratings of "2" can be expected to do average or better-than-average work in training. The differences in relationship are due to differences between men and women in both training performance and test scores. On the average women are somewhat higher on both.</p>					
% OF WOMEN WHOSE LANGUAGE TRAINING PERFORMANCE IS EXPECTED TO BE AVERAGE OR BETTER THAN AVERAGE		APTITUDE CATEGORY	% OF MEN WHOSE LANGUAGE TRAINING PERFORMANCE IS EXPECTED TO BE AVERAGE OR BETTER THAN AVERAGE		
100 80 60 40 20 0				0 20 40 60 80 100	
88%		1.		91%	
80%		2.		80%	
72%		3.		68%	
63%		4.		52%	
51%		5.		37%	
43%		6.		23%	
33%		7.		13%	
22%		8.		5%	
<p>Since many things other than aptitudes enter into the determination of training course performance, in any class of students there will usually be some whose performance will be better than would be expected from their test scores, just as there will likely be some whose performance is poorer than expected. STRENGTH OF MOTIVATION, PRIOR EXPERIENCE WITH A FOREIGN LANGUAGE, and other factors should be considered in selecting people for language training and in interpreting language training results. For example, the number of languages previously studied or learned and the amount of academic and nonacademic language-learning experience are factors not measured by the tests but are indicative of probable success in learning a foreign language. Whether such experience was in the same language as the one to be studied or in a different one is, of course, an additional relevant factor.</p>					
NUMBER OF FOREIGN LANGUAGES STUDIED OR LEARNED BY THIS INDIVIDUAL -					
MONTHS OF ACADEMIC TRAINING			NONACADEMIC EXPERIENCE (1 year or more)		
HIGH SCHOOL	COLLEGE	OTHER	READING OR WRITING	SPEAKING	
DATE		SIGNATURE OF CHIEF, A & E STAFF			
		James B. Law			
NOTE: This report may be shown to the individual concerned					

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">00000</div>	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) TITCHEL Joseph S.			2. DATE OF BIRTH 8 Dec. 1935		3. SEX M
4. GRADE GS-7		5. SERVICE DESIGNATION D		6. OFFICIAL POSITION TITLE Int'l. Asst.	
7. OFF/DIV/BR OF ASSIGNMENT OSD/1, Rm. 4, D.C.					
8. CAREER STAFF STATUS			9. TYPE OF REPORT		
<input type="checkbox"/> NOT ELIGIBLE <input checked="" type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT/SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE		
10. DATE REPORT DUE IN O.P.		11. REPORTING PERIOD 1 June 66 to 31 May 67		12. SPECIAL (Specify) Promotion record extension	
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 Supervises Operations Support Section (6 to 8 employees)		RATING NO. 6		SPECIFIC DUTY NO. 4 Conducts liaison in support of operations	
SPECIFIC DUTY NO. 2 Processes security clearances		RATING NO. 6		SPECIFIC DUTY NO. 5	
SPECIFIC DUTY NO. 3 performs name traces and summarizes information		RATING NO. 6		SPECIFIC DUTY NO. 6	
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. <div style="border: 1px solid black; padding: 5px; display: inline-block;">5</div>
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 APPL- CABLE	NOT OS- 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):					

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 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.

One of Mr. Piccolo's outstanding characteristics is his desire to improve himself. This is evidenced by both his continued educational program on the outside and by his successful effort to learn everything possible about his job. He also wants very much to obtain further career training within the DDP area, particularly in the FI field. I believe he has a definite potential for such work and that he should be given an opportunity for appropriate operational training as soon as possible.

His performance while under my supervision has consistently been well above that to be expected of an employee in his present grade, and I strongly recommend that he be promoted at once to GS-8. He has more than earned it.

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 4 May 1961	SIGNATURE OF EMPLOYEE <i>Joseph L. Piccolo</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 7 months	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 3 May 1961	OFFICIAL TITLE OF SUPERVISOR WH/4/Executive Officer	TYPED OR PRINTED NAME AND SIGNATURE <i>Jesse B. Douglas</i>
3. BY REVIEWING OFFICIAL		
<input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.		
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.		
<input type="checkbox"/> I WOULD 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 14 May 1961	OFFICIAL TITLE OF REVIEWING OFFICIAL Acting Chief, WH/4	TYPED OR PRINTED NAME AND SIGNATURE <i>E. A. STANLEY</i>

SECRET

SECRET
(When Filled In)

Recorded by
CSPD

12 JUL 1960		FITNESS REPORT		EMPLOYER SERIAL NUMBER	
SECTION A		GENERAL			
1. NAME (Last) (First) (Middle) Piccolo, Joseph S.		2. DATE OF BIRTH 12 - 8 - 35		3. SEX M	4. GRADE GS-6
5. SERVICE DESIGNATION D		6. OFFICIAL POSITION TITLE Intell Assistant		7. OFF/DIV/BR OF ASSIGNMENT DDP/HQ/L/Ops Support	
8. CATER STAFF STATUS		9. TYPE OF REPORT			
NOT ELIGIBLE	MEMBER	DEFERRED	INITIAL	REASSIGNMENT/SUPERVISOR	
PENDING	DECLINED	DENIED	ANNUAL	REASSIGNMENT/EMPLOYEE	
10. DATE REPORT DUE IN O.P.		11. REPORTING PERIOD From To 1 Feb - 15 June 1960		SPECIAL (Specify) Promotion	
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
SPECIFIC DUTY NO. 1 Supervises Operations Support and Registry Section (6 employees)		RATING NO. 5	SPECIFIC DUTY NO. 4 Conducts liaison in support of operations		RATING NO. 5
SPECIFIC DUTY NO. 2 Processes security clearances		RATING NO. 6	SPECIFIC DUTY NO. 5 Performs duties of Branch Records Management Officer		RATING NO. 5
SPECIFIC DUTY NO. 3 Performs name traces and summarizes information		RATING NO. 6	SPECIFIC DUTY NO. 6 Acts as case officer for sensitive operations		RATING NO. 4
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. 6
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 APPL. CABLE	NOT OBSERVED	RATING
					1 2 3 4 5
GETS THINGS DONE					
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):					

SEE SECTION "E" 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 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.

During the rating period Mr. Piccolo has been performing tasks that are normally assigned to personnel who hold a minimum GS rating of GS-9. Without exception he has performed each of his assignments expeditiously and thoroughly. In addition to his normal administrative functions Mr. Piccolo has been acting as a case officer on certain sensitive and complicated clandestine operations. He has performed these duties in a superior fashion. It is my unqualified opinion that Mr. Piccolo should receive at least a two-grade promotion immediately. However it is recognized that this is contrary to current Agency policy and therefore it is strongly recommended that he be promoted to the grade of GS-7 immediately. Mr. Piccolo is intelligent and extremely industrious. He has worked long hours performing a variety of important tasks. It is my opinion that Mr. Piccolo has the attributes required of career personnel working in the Foreign Intelligence area and that he should be permitted to have his career designation changed to FI. Mr. Piccolo should also be given the opportunity to receive Agency training so that he might be better qualified to perform tasks in this area of activity. There is no question that he would become a professional case officer. The Section C rating has been given after careful consideration of the rated individual's grade and grade level 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

16 June 1960

SIGNATURE OF EMPLOYEE



2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

4 1/2

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 June 1960

OFFICIAL TITLE OF SUPERVISOR

Deputy Chief, WH/4

TYPED OR PRINTED NAME AND SIGNATURE

Robert Reynolds

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

Promotion in this case is completely justified in the reviewing official's opinion

DATE

16 June 1960

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief, WH/4

TYPED OR PRINTED NAME AND SIGNATURE

Jacob D. Esterline

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 655380		
SECTION A GENERAL						
1. NAME (Last) (First) (Middle) Piccolo, Joseph S.			2. DATE OF BIRTH 8 December 1935		3. SEX Male	
4. GRADE GS-5		5. SERVICE DESIGNATION DS				
6. OFFICIAL POSITION TITLE Assistant and Chief Clerk				7. OFF/DIV/BR OF ASSIGNMENT WH/III/Mexico		
8. CAREER STAFF STATUS			9. TYPE OF REPORT			
<input checked="" type="checkbox"/> NOT ELIGIBLE <input type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT/SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE			
10. DATE REPORT DUE IN O.P. 31 May 1959		11. REPORTING PERIOD From 2 Mar 58 - 31 Mar 59 To				
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 Manages files of Restricted Projects		RATING NO. 4		SPECIFIC DUTY NO. 4 Prepares memoranda		
SPECIFIC DUTY NO. 2 Prepares pouches		RATING NO. 5		SPECIFIC DUTY NO. 5 Name checks		
SPECIFIC DUTY NO. 3 Name checks		RATING NO. 4		SPECIFIC DUTY NO. 6		
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. 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
GETS THINGS DONE					3	4
RESOURCEFUL					5	
ACCEPTS RESPONSIBILITIES						
CAN MAKE DECISIONS ON HIS OWN WHEN NEED 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):						

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 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.

Since the previous Fitness Report, employee has been designated as the alternate to the Station's Records Officer. During periods when the Records Officer has been on duty elsewhere, this employee has assumed responsibility for the Station's records establishment and performed his duties in a competent manner. Based on these considerations, the ratings contained in Sections B, C, and D were determined. (Note Section D, Items 1, 2, 3, 5, and 10.) Employee needs more experience in the following:

1. The analysis of intelligence material for file categorization (note Section D, Item 4);
2. Records Management techniques;
3. More experience in the interpretation of data in memoranda preparation (note Section D, Items 7 and 9).

His supervisor feels that considerable progress has been made on the points enumerated above, and as the employee gains experience, these weaknesses should reconcile themselves. His supervisor will continue to assign him duties designed to broaden his knowledge and effectiveness in records management. (Cont'd)

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

20 May 1959

/s/

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

17 months

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 90 DAYS

OTHER (Specify):

DATE

20 May 1959

OFFICIAL TITLE OF SUPERVISOR

Records Officer

TYPED OR PRINTED NAME AND SIGNATURE

Lorenzo B. Sanchez

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

20 May 1959

OFFICIAL TITLE OF REVIEWING OFFICIAL

Acting Chief of Station

TYPED OR PRINTED NAME AND SIGNATURE

Baron L. Dean

SECRET

S E C R E T

SECTION E (Continued)

His supervisor recommends the promotion of this employee to GS-6. It is felt that his promotion would assure the continued development of an employee who has the potential of a good records officer.

SECRET

TOP 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 subordinates and to transmit this evaluation to your supervisors 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 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 portion. 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 A, of Section "A" below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle) PICCOLO, Joseph S.		2. DATE OF BIRTH 8 December 1935	3. SEX Male	4. SERVICE DESIGNATION D8
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT WHD/III/Mexico City		6. OFFICIAL POSITION TITLE File Clerk		
7. GRADE GS-4	8. DATE REPORT DUE IN QY	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 2 December 1957 - 2 March 1958		
10. TYPE OF REPORT (Check one)	<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT-SUPPLYING <input type="checkbox"/> REASSIGNMENT-EMPLOYEE		SPECIAL (Specify)

SECTION 8.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY

-A. CHECK (X) APPROPRIATE STATEMENTS:

M	THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.		IF INDIVIDUAL IS RATED "E" IN CLASS D, A WARNING LETTER HAS BEEN SENT TO HIM OR 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 WHO I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify).
M	I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.		

B. THIS DATE 19 March 1958	C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR Lorenzo B. SANCHEZ	D. SUPERVISOR'S OFFICIAL TITLE Chief of Registry
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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 BETTER UNDERSTANDING OF THIS REPORT.

BY DP. DATE 17 Aug 1954
 Posted Pos. Control _____
 Reviewed by FUD DL 3806h

CONFIDENTIAL: THIS INFORMATION IS UNCLASSIFIED

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

A. THIS DATE 10 March 1948

B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL Winston M. Scott

C. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief of Station

SECTION C.

JOB PERFORMANCE EVALUATION

1. MEASUREMENT OF GENERAL PERFORMANCE OF DUTIES

DIFFERENCE. Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare his 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

 1. DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
 2. SERVED ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE ON TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
 3. DISCUSSES WORK WITH DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
 4. PERFORMS DUTIES IN A COMPLETELY EFFECTIVE MANNER.
 5. A FINE PERFORMANCE. KARLOS HAS MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS DEMANDED BY TWO OTHER PERSONS TO BE INSTRUCTED.

1284276

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.
- 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 the 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
- 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
Manages files (chronos)	5	Prepares memoranda	4
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER
Prepares pouches	5		
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER
Name checks	4		

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

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

Employee is competent, displays initiative and intelligence in approaching records

management problems. He definitely likes records work and has supervisory potentialities. Employee needs more experience in the analysis of record material and composition of memoranda. He is conscientious and is a very hard-working employee.

SECTION 4. 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 KNOW IN THE ORGANIZATION
- A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS
- AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION
- EXCELS 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, 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 5 of Section "F" below.

SECTION E. GENERAL			
1. NAME (Last) (First) (Middle) PICCOLO, Joseph S.	2. DATE OF BIRTH 8 December 1935	3. SEX Male	4. SERVICE DESIGNATION DS
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT WHD/III/Mexico City		6. OFFICIAL POSITION TITLE File Clerk	
7. GRADE GS-4	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 2 December 1957 - 2 March 1958	
10. TYPE OF REPORT (Check one)	<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT-SUPERVISOR <input type="checkbox"/> REASSIGNMENT-EMPLOYEE	SPECIAL (Specify)

SECTION F. CERTIFICATION		
1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE 19 March 1958	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR Lorenzo B. SANCHEZ	C. SUPERVISOR'S OFFICIAL TITLE Chief of Registry
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO:		
A. THIS DATE 19 March 1958	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL Winston M. SCOTT	C. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief of Station

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.	
<div style="border: 1px solid black; padding: 5px; display: inline-block;">5</div> RATING NUMBER	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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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		
2	3	A GROUP BEING THE BASIC JOB (Truck drivers, stenographers, technicians or professional specialists of various kinds) whose contact with immediate subordinates is frequent (First line supervisors)		
2	3	A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)		
0	0	A GROUP, WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, COORDINATION AND POLICY (Executive level)		
3	3	FREQ CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT		
2	3	FREQ IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION		
2	3	FREQ IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX		
		OTHER (Specify)		

FORM 45 (Part II)

 USE PREVIOUS EDITIONS
 OF FORMS 45 AND 45a WHICH
 ARE OBSOLETE

SECRET

Potential

101

SECRET
(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

Employee has the potential for a good records officer. Should he develop as rapidly throughout his tour as he has done in this initial period, he will be ready to assume the responsibility for the records establishment at any medium sized field station in his next assignment.

APR 15 2 15 PM '58

SECTION II.

FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

Supervisor will give employee instruction in Records Management techniques, and every opportunity to gain experience in analysis of record material.

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

Employee should be given a grade promotion as soon as practicable because he deserves it and so as to encourage him.

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
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	3	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
3	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 THOUGHTFUL OF OTHERS
3	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
3	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGMENT
4	6. SHOWS DESIRE TO GROW PERSONALLY	4	16. DOES HIS JOB WITHOUT STRONG SUPPORT	4	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	3	17. LOOKS UP WITH SOLUTIONS TO PROBLEMS	4	27. IS VERSATILE
2	8. HAS INTEREST FOR FUN	4	18. IS HONEST	3	28. HIS EFFICIENCY IS CONSTRUCTIVE
4	9. GETS THINGS DONE	3	19. THINKS LOGICALLY	4	29. FACILITATES SMARTER OPERATION OF HIS OFFICE
1	10. IS IN KEYS WITH SUPERVISOR	3	20. COMPLETES ASSIGNMENTS WITH A SCHEDULED TIME	1	30. DOES NOT ALLOW OTHERS TO INTERFERE WITH HIS WORK

SECRET

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. 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 20-379. 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) PICCOLO	(First) Joseph	(Middle) S.	2. DATE OF BIRTH 8 Dec 1935	3. SEX M	4. SERVICE DESIGNATION DS
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT FI RI A&O			6. OFFICIAL POSITION TITLE 0305.01 File Clerk		
7. GRADE GS-4	8. DATE REPORT DUE IN OP 4 Feb 1957 - 18 Oct 1957		9. PERIOD COVERED BY THIS REPORT (Inclusive dates)		
10. TYPE OF REPORT (Check one)	INITIAL		REASSIGNMENT-SUPERVISOR		SPECIAL (Specify)
	ANNUAL		REASSIGNMENT-EMPLOYEE		

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT:

A. CHECK (X) APPROPRIATE STATEMENTS:

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

0. THIS DATE **21 October 1957** C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR **Shirley Smith** D. SUPERVISOR'S OFFICIAL TITLE **Desk Supervisor, RI/IN**

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 **BN** DATE **12/3/57**
 Forwarded Per. Control **BN**
 Reviewed by PUD **BN 12/3/57**

☐ 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 October 1957** B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL **August J. Zarichak** C. OFFICIAL TITLE OF REVIEWING OFFICIAL **Supervisor, RI/IN 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.

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

COMMENTS:

MADE 11:30 AM '57

SECRET

Performance

SECRET
(When Filled In)

OFFICE OF PERSONNEL

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

- a. 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.
 b. Rate performance on each specific duty considering ONLY effectiveness in performance of the specific duty.
 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).
 d. Compare in your mind, when possible, the individual being rated with other individuals 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:

ORG. 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	DERRIVING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
EDITING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKEING 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.

DESCRIPTIVE RATING NUMBER	1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER
	2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY	FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS
	3 - PERFORMS THIS DUTY ACCEPTABLY	7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY
	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 Conducting name checks to render case disposition.	RATING NUMBER 4	SPECIFIC DUTY NO. 4	RATING NUMBER
SPECIFIC DUTY NO. 2 Alphabetizing and filing index cards.	RATING NUMBER 4	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.

Subject performed his duties effectively and competently.
He gets along well with his fellow employees.

SECTION 4. 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...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 - EXCELS 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)

PS expy

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 20-379. 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) PICCOLO	(First) Joseph	(Middle) S.	2. DATE OF BIRTH 8 Dec 1935	3. SEX M	4. SERVICE DESIGNATION DS
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT PI RI A&O			6. OFFICIAL POSITION TITLE 0305.01 File Clerk		
7. GRADE GS-4	8. DATE REPORT DUE IN OP 4 Feb 1957	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 4 Feb 1957 - 18 Oct 1957			
10. TYPE OF REPORT (Check one)		11. SPECIAL (Specify)			
<input type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT-SUPERVISOR <input type="checkbox"/> REASSIGNMENT-EMPLOYEE					

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT:

Joseph S. Piccolo

A. CHECK (X) APPROPRIATE STATEMENTS:

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

B. THIS DATE 21 October 1957	C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR Shirley Smith <i>Shirley Smith</i>	D. SUPERVISOR'S OFFICIAL TITLE Desk Supervisor, RI/IN
--	---	---

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.

☐ 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 October 1957	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL August J. Zurichak <i>August J. Zurichak</i>	C. OFFICIAL TITLE OF REVIEWING OFFICIAL Supervisor, RI/IN 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.

4
INSERT RATING NUMBER

- 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)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES		OFFICE OF PERSONNEL	
DIRECTIONS: 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. b. 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 (not as supervisors (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: <div style="display: flex; justify-content: space-between; font-size: small;"> <div> ORAL BRIEFING GIVING LECTURES CONDUCTING SEMINARS WRITING TECHNICAL REPORTS CONDUCTING EXTERNAL LIAISON TYPING TAKING DICTATION SUPERVISING </div> <div> HAS AND USES AREA KNOWLEDGE DEVELOPS NEW PROGRAMS ANALYZES AND SPECIAL REPORTS MANAGES FILES OPERATES RADIO COORDINATES WITH OTHER OFFICES WRITES RECEPTIONS PREPARES CORRESPONDENCE </div> <div> CONDUCTS INTERVIEWS PREPARES SUMMARIES TRANSLATES GERMAN DEBRIEFING SOURCES KEEPS BOOKS DRIVES TRUCK MAINTAINS AIR CONDITIONING EVALUATES SIGNIFICANCE OF DATA </div> </div> 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.			
DESCRIPTIVE RATING NUMBER	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	
SPECIFIC DUTY NO. 1 Conducting name checks to render case disposition.	RATING NUMBER 4	SPECIFIC DUTY NO. 4	RATING NUMBER
SPECIFIC DUTY NO. 2 Alphabetizing and filing index cards.	RATING NUMBER 4	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.			
<p>Subject performed his duties effectively and competently. He gets along well with his fellow employees.</p>			
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.			
<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> 5 </div> 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...BETTER AVERAGE P.Y. 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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES EXPLAIN FULLY:			

SECRET

SECRET
(When Filled In)

TRAINING EVALUATION--CLERICAL INDUCTION

SECTION I IDENTIFYING INFORMATION

NAME OF STUDENT PICCOLO, Joseph B.		DTA M	DATES OF ATTENDANCE 11-15 February 1957
DATE OF BIRTH 8 December 1935	EXP. DATE 4 February 1957	TITLE AND GRADE File Clerk GS-4	

SECTION II CHARACTERISTICS OF THE COURSE

Each course subject is taught daily in 45-minute sessions for a 5-day period. Students who do not meet Agency standards in shorthand and/or typewriting within this 5-day period receive further instruction in an attempt to meet the established qualifications. The second week of geography instruction is given to students who have not been assigned to their positions.

SECTION III OBJECTIVES

To develop speed and accuracy in shorthand, to take dictation at a minimum of 40 words per minute for 3 minutes, and to transcribe with 5 or fewer errors in not more than 15 minutes. (For qualification, students must meet this requirement at least once.)

To develop speed and accuracy in typewriting and to type a net score of 40 words per minute on a 10-minute writing (score attained after deduction of errors). (For qualification, students must meet this requirement at least once.)

To review the fundamentals of grammar, punctuation and capitalization, and word usage, and to aid the students in applying these principles of correct English usage.

To familiarize students with countries, capitals, products, political situations, and communist attitudes of Europe and Asia. (These continents are covered in alternate weeks.)

To introduce students to the system of filing as outlined in the Agency's "Handbook for Subject Filing."

SECTION IV RATINGS

Each student is not assigned to all course subjects. The subjects this student has completed are those for which ratings are recorded below.

SHORTHAND	PPP	PPPP	PPPPP	QUALIFIED	YES	NO
TYPEWRITING	PPP	PPPP	PPPPP	QUALIFIED	YES	NO
NOTE: Student met Agency standards in the following subjects before entrance to course:				SHORTHAND		
				TYPEWRITING		
SUBJECT	RATING	POOR	FAIR	SATISFACTORY	EXCELLENT	
GRAMMAR	THIS CLASS					
	CLASSES					
PUNCTUATION AND CAPITALIZATION	THIS CLASS					
	CLASSES					
WORD USAGE	THIS CLASS					
	CLASSES					

NUMBERS INDICATE HOW MANY STUDENTS RECEIVED EACH RATING. THE ASTERISKS INDICATE THIS STUDENT'S RATINGS.

EXCELLENT - - - thorough knowledge of material presented and above-average performance in meeting course goals.

SATISFACTORY - - average knowledge of material presented and adequate performance in meeting course goals.

FAIR - - - - borderline knowledge of material presented and limited performance in meeting course goals.

PPP - - - - inadequate knowledge of material presented and unsatisfactory performance in meeting course goals.

Instruction in geography and in filing provides background information. Consequently, achievement is not measured in these subjects. Participation is indicated below.

Geography ☒ Filing ☐

SECTION V COMMENTS

WFO TO INDUCTION - TRAINING

SIGNATURE OF OFFICER IN CHARGE

SECRET

CONFIDENTIAL
(When Filled In)

THIS INFORMATION IS FOR AUTHORIZED PERSONS ONLY. TEST SCORES ARE NOT TO BE REVEALED TO EXAMINEE.							
EVALUATION OF TEST RESULTS (CLERICAL)						DATE 5 June 1956	
NAME PICCOLO, Joseph Stephan			GRADE AND POSITION GS-4 Clerk		PERSONNEL OFFICER Mr. Rader		
<p>THIS REPORT IS PROVIDED AS A SERVICE OF THE ASSESSMENT AND EVALUATION STAFF, OFFICE OF TRAINING, TO ASSIST APPROPRIATE OFFICIALS IN REACHING DECISIONS ABOUT THIS INDIVIDUAL. IT IS NOT INTENDED THAT YOUR DECISION BE BASED ON RESULTS OF TESTS ALONE, BUT THAT YOU COMBINE THIS INFORMATION WITH WHAT YOU KNOW ABOUT HIS BACKGROUND OF EDUCATION AND EXPERIENCE.</p> <p>THIS REPORT EVALUATES THE SUBJECT'S PERFORMANCE ON SEVERAL TESTS BY SHOWING HOW WELL HE HAS DONE IN COMPARISON WITH OTHERS TESTED AT CIA FOR THE SAME GRADE LEVEL IN THE SAME KIND OF WORK. SCORE DISTRIBUTIONS FOR EACH TEST AT EACH GRADE LEVEL ARE SUB-DIVIDED TO DERIVE THE DESCRIPTIVE RATINGS BELOW AS FOLLOWS: VERY HIGH - HIGHEST 10%, HIGH - NEXT LOWER 15%, ABOVE AVERAGE - NEXT LOWER 15%, AVERAGE - MIDDLE 20%, BELOW AVERAGE - NEXT LOWER 15%, LOW - NEXT LOWER 15%, VERY LOW - LOWEST 10%.</p> <p>NOTE: It is important that you remember two essential points as you review this report:</p> <ol style="list-style-type: none"> 1. This evaluation is applicable only for the grade and position stated above. Re-evaluation is necessary if an individual is to be considered for any other grade, and may be requested by the Placement Officer. 2. All tests are of equal importance for every position. It will therefore be necessary for you to recognize the relative importance of each test to the specific requirements of the position for which this person is being considered. 							
NAME OF TEST	VERY LOW 10%	LOW 15%	BELOW AVERAGE 15%	AVERAGE 20%	ABOVE AVERAGE 15%	HIGH 15%	VERY HIGH 10%
CLERICAL SPEED AND ACCURACY							
SPELLING				✓			
SENTENCES					✓		
NUMERICAL ABILITY						✓	
ABSTRACT REASONING					✓		
SPACE RELATIONS							
MECHANICAL REASONING							
VERBAL REASONING							
LA-B							
TYPING TEST			SHORTHAND TEST				
GROSS	NET	ERRORS	FORM	LETTER I	LETTER II	LETTER III	
LANGUAGE BACKGROUND							
SUBJECT STATED THAT HE(SHE) LEARNED THE _____ LANGUAGE BEFORE LEARNING ENGLISH AND THAT HE(SHE) IS MORE PROFICIENT AT THIS TIME IN _____							
THESE FACTS ARE BROUGHT TO YOUR ATTENTION SINCE IT IS POSSIBLE THAT A SERIOUS DIFFICULTY WITH THE ENGLISH LANGUAGE COULD IMPAIR PERFORMANCE ON THESE TESTS TO SOME DEGREE							
REMARKS:							

DESCRIPTIONS OF THESE TESTS ARE GIVEN ON SEPARATE SIDE OF THIS REPORT

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(When Filled In)

TEST	DESCRIPTION																
CLERICAL SPEED AND ACCURACY	A test of speed and accuracy of response in a simple perceptual task. Measures ability to perceive, retain momentarily, and correctly respond to simple number and letter combinations. JUN 6 11 01 AM '55																
SPELLING	A test of ability to distinguish between correctly and incorrectly spelled words of everyday usage found to be most frequently misspelled.																
SENTENCES	A test of ability to distinguish errors in spelling, punctuation, and grammar in sentences.																
NUMERICAL ABILITY	A test of ability to reason with numbers, to manipulate numerical relationships, and to deal with quantitative materials. No verbal element is present in the format of the problems.																
ABSTRACT REASONING	A non-verbal test of reasoning ability. Measures ability to perceive relationships in changing abstract figure patterns and to generalize changes into operating principles.																
SPACE RELATIONS	A test of ability to visualize and mentally manipulate forms and patterns in three-dimensional space.																
MECHANICAL REASONING	A test of ability to understand and apply mechanical and physical principles presented pictorially in familiar settings.																
VERBAL REASONING	A verbal test of reasoning ability. Measures ability to abstract, generalize, and think constructively from concepts presented in word analogies.																
LEARNING ABILITY Form 5	A test of general mental ability consisting of questions on vocabulary, arithmetical reasoning, and verbal analogies.																
TYPING	A ten-minute straight copy test of speed and accuracy in typing material of average difficulty. Typing scores are reported as follows: Gross - Total words per minute. Net - Gross words per minute minus 1 for each error made. Errors - Total Number																
SHORTHAND	A test composed of three typical business letters dictated at different speeds as follows: Letter I: 60 words per minute; Letter II: 80 words per minute; Letter III: 100 words per minute. Maximum possible scores are as follows: <table><tr><td></td><td>Letter I</td><td>Letter II</td><td>Letter III</td></tr><tr><td>Form A</td><td>49</td><td>50</td><td>60</td></tr><tr><td>Form B</td><td>50</td><td>51</td><td>49</td></tr><tr><td>Form C</td><td>50</td><td>50</td><td>50</td></tr></table>		Letter I	Letter II	Letter III	Form A	49	50	60	Form B	50	51	49	Form C	50	50	50
	Letter I	Letter II	Letter III														
Form A	49	50	60														
Form B	50	51	49														
Form C	50	50	50														

CONFIDENTIAL

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD														
TO: Office of Personnel, Control Division, Statistical Reporting Branch														
SERIAL NO.		NAME												
1-6		LAST			FIRST				MIDDLE					
025658		(Print) PICCOLO			7-24 JOSEPH				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. 56, 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 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION			CODE	37 38 39		CODE 40-42		
25-26	27-28	29-30	31-32	33-34	35-36									
TDY DATES OF SERVICE														
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREA(S)			
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - TDY (Basic) 4 - CORRECTION 5 - CANCELLATION			CODE	37 38 39		CODE 40-42		
25-26	27-28	29-30	31-32	33-34	35-36									
01	20	77	01	24	77							WEST HEM 811		
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA														
SOURCE DOCUMENT AND CERTIFICATION														
<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. LA 137-77					DOCUMENT DATE/PERIOD 20 JAN 77 to 24 JAN 77									
REMARKS														
PREPARED BY SFC					REPORT ANNOTATED ON CONTROL DOCUMENT					ABOVE DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT CITED				
DATE 3/10/77					SIGNATURE Eugene B. Brown									
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER														

11 14514

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16-101

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MEMORANDUM FOR: Joseph S. Piccolo

SUBJECT : Acknowledgment of Evaluation Board Functional Category

REFERENCE : Evaluation Board Precepts for Your Grade

1. Based upon an examination of your past assignments and duties, and after considering likely future assignments, you have been placed (subject to your signature below) in the functional category IXG for Evaluation Board purposes. Precise definitions of this category are contained in the Evaluation Board precepts for your grade. This placement is made in order that your performance, growth potential, and career planning may be judged against officers similarly placed professionally. YOU ARE URGED TO STUDY THE PRECEPTS AND CONSIDER YOUR OWN CASE CAREFULLY.

2. In general, you should consider the following;
 - a. Categories are sharply defined. Competition is within categories, not between them. Thus, a weak B/OG performance is not strengthened by reclassifying it as B/OS.
 - b. A change in category after sustained performance in a different category may cause a temporary loss of momentum in your career advancement until you have demonstrated proficiency in your new assignment.
 - c. A category change should not be initiated for the period of a temporary, training or rotational assignment unless a permanent change of career track will follow.

3. If you believe that this is not the correct category for you because the substantive nature of your job more closely approximates another category or because you have made a permanent change of career track, please take the matter up through your command channel to secure the concurrence of your component of assignment or of your home base component, as appropriate, to a change of your category. Previously assigned and acknowledged categories will remain in effect until a fully executed acknowledgment of change is received by the Career Management Staff.

4. Please sign and date this notification in the space provided and return it to your Personnel Evaluation and Management Officer or to your Personnel Officer.

ACKNOWLEDGED:

Joseph S. Piccolo
Signature of Addressee

11 April 1974
Date

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REPORT OF SERVICE ABROAD														
TO: Office of Personnel, Control Division, Statistical Reporting Branch <div style="float: right; border: 1px solid black; padding: 5px; transform: rotate(-5deg);"> FILE PUNCHED BY <i>[initials]</i> </div>														
SERIAL NO.		NAME												
1-6		LAST (Print)		FIRST 7-24				MIDDLE						
025 658		PICCOLA		JOSEPH				S.		JR.				
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. 88, 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				CODE			CODE		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 8 - CANCELLATION			37	38	39	40-42		
TDY DATES OF SERVICE														
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY			
MONTH	DAY	YEAR	MONTH	DAY	YEAR				CODE			CODE		
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 8 - CANCELLATION			37	38	39	40-42		
06	12	76	06	22	76				2			AFRICA 809		
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA														
SOURCE DOCUMENT AND CERTIFICATION														
<input checked="" type="checkbox"/> TRAVEL VOUCHER						DISPATCH								
CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT								
OTHER (Specify)														
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD								
C.I. 106-76						6/12/76								
REMARKS														
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;"> PREPARED BY BCL B L DIVISION, CPO. C B T DIVISION </td> <td style="width:30%;"> REPORT ANNOTATED ON CONTROL DOCUMENT DATE 7-27-76 </td> <td style="width:40%;"> ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED SIGNATURE C. Washat </td> </tr> </table>												PREPARED BY BCL B L DIVISION, CPO. C B T DIVISION	REPORT ANNOTATED ON CONTROL DOCUMENT DATE 7-27-76	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED SIGNATURE C. Washat
PREPARED BY BCL B L DIVISION, CPO. C B T DIVISION	REPORT ANNOTATED ON CONTROL DOCUMENT DATE 7-27-76	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED SIGNATURE C. Washat												
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER														

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(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

GENERAL NO.

5450

LAST

FIRST

www.elsevier.com/locate/jmb

100

(Print)

7-34

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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 CFI NO. 30, 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 - PCS (Basic)	CODE			FOOI
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION	37	38-39		40-42
						5 - CANCELLATION				

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/S USE ONLY	AREALS	
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE			CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39		40-42
C 8	25	76	C 9	03	76		2		FLORIDA	8821

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. CI 25-76 DOCUMENT DATE/PERIOD 8-22-76

REMARKS

PREPARED BY	REPORT SUBMITTED AS	ABOVE DATA DERIVED CORRECTLY BASED UPON SOURCE
DATE	CRITICAL DOCUMENT	DOCUMENT CITED
1. B. DIVISION, STON.	DATE	SIGNATURE
2. B. DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

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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 8 ALSO COMPLY WITH HHS 70-2. 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) (Suffix)
PICCOLO Joseph Stephan Jr.

MARITAL STATUS (Check one)

☐ SINGLE ☒ MARRIED ☐ SEPARATE ☐ DIVORCED ☐ WIDOWED ☐ ANNULLED

IF MARRIED, PLACE OF MARRIAGE: **Falls Church, Virginia** DATE OF MARRIAGE: **14 Feb 1967**

IF DIVORCED, PLACE OF DIVORCE DECREE: DATE OF DECREE:

MEMBERS OF FAMILY

NAME OF SPOUSE: **Norma W. Piccolo** ADDRESS (No. Street, City, State, Zip Code): **2627 Mattox Creek Dr., Oakton, Va. 22124** TELEPHONE NO.: **(703) 629-4130**

NAME OF CHILDREN:

NAME	ADDRESS	SEX	DATE OF BIRTH
Burgundy R. Piccolo	Same	F	17 May 71
Normandy D. Piccolo	Same	F	23 Feb 70

NAME OF FATHER (or male guardian): **Joseph Piccolo Sr.** ADDRESS: **1636 N.E. 20th Street, Fort Lauderdale, Fla. 33305** TELEPHONE NO.: **(305) 564-5234**

NAME OF MOTHER, INCLUDING MAIDEN NAME (or female guardian): **Irene A. Sutor Piccolo** ADDRESS: **1636 N.E. 20th Street, Fort Lauderdale, Florida 33305** TELEPHONE NO.: **(305) 564-5234**

WHAT MEMBERS OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY? **Both Parents and my In-Laws are aware.**

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 51% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HR 22-15). SPECIFY NAMES AND RELATIONSHIPS.

NAME	DATE OF BIRTH	RELATIONSHIP
None		

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Mr., Mrs., Miss): **Mrs. PICCOLO, Irene A.** RELATIONSHIP: **Mother**

HOME ADDRESS (No. Street, City, State, Zip Code) AND NAME OF EMPLOYEE, IF APPLICABLE: **1636 N.E. 20th Street, Fort Lauderdale, Fla. 33305** HOME TELEPHONE NUMBER: **(305) 564-5234**

BUSINESS ADDRESS (No. Street, City, State, Zip Code) AND NAME OF EMPLOYEE, IF APPLICABLE: **N/A** BUSINESS TELEPHONE & EXTENSION:

IS THE INDIVIDUAL NAMED ABOVE WILLING TO BE NOTIFIED IN CASE OF EMERGENCY (If not, give name and address of organization to be notified in case of emergency)? **X**

IS THE INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON BEHALF OF THE EMPLOYEE IN THE EVENT OF AN EMERGENCY (If not, give name and address of person to be notified in case of emergency)? **X**

WILL THIS INDIVIDUAL SIGN THAT HE HAS BEEN SO NOTIFIED BY YOUR EMERGENCY ADDRESSING OFFICER (If not, explain why on item 8)? **X**

The person named in item 3 or 4 should also be notified in case of emergency. If such notification is not of record because of death in an armed service, please so state in item 8 on the reverse side of this form.

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(When filled in)

5. VOLUNTARY ENTITIES	
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.	
Joseph S. Piccolo Jr. & Norma W. Piccolo (Joint Accounts)	
Potomac Bank & Trust Co.	(Checking and Savings)
10355 Lee Highway	(Safe Deposit Box)
Fairfax, Virginia 22030	
ARE YOU A MEMBER OF THE NORTHEAST FEDERAL CREDIT UNION?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, DO YOU HAVE A JOINT ACCOUNT?	<input checked="" type="checkbox"/> YES <input 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?)
Safe Deposit Box, Potomac Bank & Trust. (Copy with Parents)	
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) Specified in Will. Initial contact would be In-Laws. Mrs. Bertha G. Wyatt, 6633 Hoadly Road, Manassas, Va. 22110	
HAVE YOU EXECUTED A POWER OF ATTORNEY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes", who possess the power of attorney?)	
My Wife.	
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 22-5 (Full Address)
	2657 Mattox Creek Drive, Oakton, Virginia 22124
8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-5) (To Be Completed by Employee Desiring Such Change While Assigned in Headquarters)	
FULL ADDRESS	DEPT'S DIRECTOR OR DESIGNATE
Mr. Norman H. Wyatt (In-Laws)	DATE
6633 Hoadly Road	
Manassas, Va. 22110	
SIGNED AT	DATE
Washington D.C.	29 Feb 77

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SECRET
(When filled in)

SERVICE ABROAD AGREEMENT

I. GENERAL

IT IS UNDERSTOOD THAT YOU AGREE TO SERVE THE PERIOD OF SERVICE ABROAD PRESCRIBED IN SECTION II BELOW AND THAT THE GOVERNMENT IS OBLIGATED TO RETURN YOU, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS UPON THE SATISFACTORY COMPLETION OF THIS PERIOD. YOUR ALLOWABLE EXPENSES SHALL BE DETERMINED IN ACCORDANCE WITH AGENCY REGULATIONS.

IF YOU TERMINATE YOUR PERMANENT ASSIGNMENT OUTSIDE THE CONTINENTAL UNITED STATES BEFORE YOU COMPLETE 12 MONTHS OF CREDITABLE SERVICE FOLLOWING THE DATE OF YOUR ARRIVAL ABROAD, YOU WILL BE REQUIRED TO REIMBURSE THE GOVERNMENT FOR ALL EXPENSES IT INCURS IN THE TRAVEL AND TRANSPORTATION OF YOU, YOUR DEPENDENTS, YOUR HOUSEHOLD AND PERSONAL EFFECTS TO YOUR POST. IF YOU FAIL TO COMPLETE YOUR PRESCRIBED TOUR OF DUTY ABROAD YOU WILL NOT BE ENTITLED TO THE RETURN TRAVEL AND TRANSPORTATION OF YOURSELF, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS TO THE UNITED STATES. IF, HOWEVER, AGENCY OFFICIALS DETERMINE THAT YOUR EARLY DEPARTURE IS NECESSARY FOR OFFICIAL REASONS, OR FOR PERSONAL REASONS OF SIGNIFICANT INTEREST TO THE GOVERNMENT, THEY MAY WAIVE THE REIMBURSEMENT OF EXPENSES ALREADY INCURRED, OR AUTHORIZE YOUR RETURN TRAVEL AND TRANSPORTATION, WHICHEVER IS APPLICABLE.

IF ELIGIBLE UNDER THE TERMS OF HR 20-30, YOU WILL BE GRANTED HOME LEAVE AS SOON AS IT CAN BE ARRANGED AT GOVERNMENT CONVENIENCE AFTER COMPLETION OF YOUR PRESCRIBED TOUR OF DUTY, PROVIDED YOU HAVE SERVED AT LEAST 18 MONTHS OF CONTINUOUS CREDITABLE SERVICE OUTSIDE THE UNITED STATES. HOME LEAVE AND HOME LEAVE TRAVEL ARE CONTINGENT UPON YOUR WILLINGNESS TO RETURN, AND CONTEMPLATION BY AGENCY OFFICIALS THAT YOU WILL RETURN TO SERVICE OUTSIDE THE UNITED STATES IMMEDIATELY AFTER HOME LEAVE OR UPON COMPLETION OF AN ASSIGNMENT TO THE UNITED STATES.

YOU ARE ADVISED THAT NO MONIES DUE YOU FROM THE GOVERNMENT MAY BE APPLIED IN LIQUIDATION OF ANY INDEBTEDNESS ARISING FROM VIOLATION OF THIS AGREEMENT. YOU WILL BE AFFORDED ALL NORMAL RIGHTS IN APPEALING DECISIONS MADE PURSUANT TO THIS AGREEMENT.

NAME OF EMPLOYEE

PICCOLO, Joseph S., Jr.

50

U

II. TOUR OF DUTY ABROAD

1. NAME OF POST OF ASSIGNMENT

Mexico City, Mexico

7. PERIOD OF SERVICE ABOARD AS PASSENGER: 12 1/2 in U. S. ON C. BELGIAN

A. STANDARD TOUR OF DUTY OF 24 HOURS - X

C. NONSTANDARD TOUR OF DUTY OF _____ MONTHS FOR
THIS TOUR ONLY FOR THE EMPLOYEE SIGNING THIS AGREEMENT.
(See HR 20-1A)

REQUESTED (Form attached)

OPERATING OFFICIAL

8. TRANSFERRED FROM CH DUTY OF _____ UNIT
PREVIOUSLY APPROVED PER NO 23. 10

REPORTING CRIMINAL

CONCUR

CUSTOM SERVICE

DEPUTY DIRECTOR

APPROVED

DIRECTOR OF PLANNING

144. PERMANENT PLACE OF RESIDENCE

[illegible][illegible]

15 2189.

Si Cat i

11. 10/23/73 1. 01. 010050

0 2 0 4 0 2 0 1

14092800 14 04 04 210000

SECRET

(when filled in)

3. PHYSICAL DRELLING PLACE (Permanent Place of Residence unless address in item 6 is approved in lieu thereof) FULL ADDRESS 2687 Mattox Creek Drive Oakton, Virginia 22124		4. OTHER PLACE REQUESTED (Requested Permanent Place of Residence if different from item 3) FULL ADDRESS N/A	
DEPUTY DIRECTOR <i>[Signature]</i>		CONCUR DEPUTY DIRECTOR DATE	
		APPROVED DIRECTOR OF PERSONNEL DATE	
APPROVED DEPUTY DIRECTOR <i>[Signature]</i>		APPROVED DIRECTOR OF PERSONNEL DATE	
IV. HOME LEAVE POINT 7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE: YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE. 8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF HR 20-30D(3)(C). THE REQUEST MUST BE ACCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.			
9. DESIGNATION PER ITEM 7 ABOVE FULL ADDRESS 6633 Hoadly Road Manassas, Virginia 22110		10. DESIGNATION PER ITEM 8 ABOVE FULL ADDRESS	
RELATIONSHIP OF RELATIVE AT HOME LEAVE POINT Parents-in-law		CONCUR DEPUTY DIRECTOR DATE	
		APPROVED DIRECTOR OF PERSONNEL DATE	
APPROVED DEPUTY DIRECTOR <i>[Signature]</i>		APPROVED DIRECTOR OF PERSONNEL DATE	
EMPLOYEE CERTIFICATION I have read and understand my service obligations and travel entitlements as described in this agreement.			
Signature of Employee <i>[Signature]</i>		DATE 12 Feb 1999	

SECRET

(WHEN FILLED IN)

QUALIFICATIONS SYSTEM RECORD CHANGE

APPLICANT COOLING DATA

1. ID	2. APPL. NO.	3. NAME
< 2	6-DIGITS	MUST CONTAIN 20-DIGITS
4. DATE OF BIRTH		5. DATE CODED
MO DA YR	MO DA YR	THE DATA ABOVE (ITEMS 2 THRU 5) WILL BE FILLED IN WHEN CODING AN APPLICANT FOR THE FIRST TIME. THIS FORM IS THEN ATTACHED TO FORM 1962, MASTER QUALIFICATIONS CODING RECORD.
.	.	

LANGUAGE CODING DATA - FORM 444c

1. ID		2. EMPLOYEE NO.		3. NAME		4. LANGUAGE DATA CODE									
◀ 3		•		3-LETTERS		•		BASE CODE	R	W	P	S	U	T	YR
5. DATE SUBMITTED				6. DATE OF BIRTH				WHEN FORM 444C DENOTES NO LANGUAGE COMPETENCE, ENTER THE FOLLOWING IN ITEM 4: "NO+LANGUAGE" (12-DIGITS)							
MO		DA		YR		MO									
•						•									

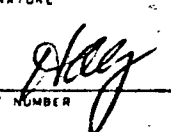
LANGUAGE PROFICIENCY TEST DATA

1. ID	2. EMPLOYEE NO.	3. NAME	4. CODE	5. LANGUAGE DATA BEFORE TEST							
		3-LETTERS	C-A-D	BASE CODE	R	W	P	S	U	T	YR
<5	425658	PIC	C	BL18	i	3	i	i	i	4	69
6. LANGUAGE DATA AFTER TEST				7. DATE OF TEST			DATA FOR QM 2 THRU 7 IS EXTRACTED FROM 1273. LANGUAGE PROFICIENCY AND AWARDS DATA				
BASE CODE	R	W	P	S	U	T	YR	MO	DA	YR	
BL18	i	3	i	E	i	4	76	42	11	76	

QUALIFICATIONS RECORD CHANGE

[illegible]

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(When Filled In)

CERTIFICATION OF LANGUAGE PROFICIENCY																
1. EMPLOYEE NO.		2. NAME (LAST-FIRST-MIDDLE)				3. TYPE CHANGE		4. LANGUAGE DATA PRIOR TO TEST								
125154		PICCOLO, JOSEPH S.				A = ADD C = CHANGE D = DELETE		CODE	LAN. CODE	R	E	P	S	U	1/T	YEAR
5. LANGUAGE DATA AFTER TEST						6. DATE TESTED		7. DATE OF BIRTH		8. GRADE		9. OFFICE OR DIVISION				
LAN. CODE	R	E	P	S	U	1/T	YEAR	02/11/76		12/12/35		13 LA				
NOTICE TO PERSON TESTED																
10. ON THE DATE SHOWN IN ITEM 6 ABOVE, YOU WERE TESTED IN <u>SPANISH BL18</u> AND YOUR TEST SCORES ARE AS FOLLOWS: (NAME OF LANGUAGE)																
READING		WRITING		PRONUNCIATION		SPEAKING		UNDERSTANDING		TEST RATINGS						
I+		+		+		E		I		Z = ZERO L = INTERMEDIATE S = SLIGHT H = HIGH E = ELEMENTARY N = NATIVE						
11. REMARKS: * Indicates not tested or Pronunciation included in Speaking grade										12. SIGNATURE						
10/11/76 DATE: 10/11/76																
										13. TEST NUMBER						
										27137						

FORM 1273 1-74 PREVIOUS EDITIONS

(10-45)

~~CONFIDENTIAL~~
SECRET

E2. IMPDET CL. BY: 007822

1 - CP/QAB

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	5						5
	6						6

1 839692 EIA497 PAGE 01 IN 889961
TOR: 141553Z APR 76 LIMA 32942

SECRET 141519Z APR 76 STAFF

CITE LIMA 32942

TO: DIRECTOR,

RYBAT SECRETARY

Joseph S. Piccolo

1. WITH COMPLIMENT MESSRS. PICCOLO AND SILEO ON THEIR HANDLING OF CI SURVEY AT LIMA, THEY WERE WELL PREPARED IN ADVANCE, WORKED HARD HERE, AND WERE VERY SELF SUFFICIENT, CAUSING MINIMUM DISRUPTION OF STATION ACTIVITIES. THEY DUG DEEPLY BUT MADE A GREAT EFFORT TO BE CONSTRUCTIVE AT ALL TIMES, RATHER THAN JUST PLAIN CRITICAL. ONCE WE GOT GOING THE FEELING THAT WE WERE BEING INSPECTED QUICKLY DISAPPEARED AND WAS REPLACED BY ONE OF TEAMWORK.

2. ASIDE FROM PROVIDING HQS WITH OUR CI PROFILE, BENEFITS ACCRUED TO THE STATION FROM THE SURVEY. IT MOTIVATED A USEFUL SELF-ANALYSIS BEFORE THE TEAM ARRIVED. THE TEAM'S STUDY OF HQS FILES, WHICH MOST OF US HAD NEVER READ, UNCOVERED VARIOUS INDICATORS WHICH GAVE BETTER PERSPECTIVE TO MANY OF OUR CASES. THE INFORMAL FRANK DISCUSSIONS RESULTED IN A NUMBER OF IDEAS FOR CHANGES WHICH WE WILL MAKE. WE LOOK FORWARD TO RECEIVING THE TEAM'S FORMAL REPORT, AT WHICH TIME WE WILL COMMENT ON ACTIONS TAKEN AND PLANNED, AND PROVIDE A FEW IDEAS WHICH MIGHT BE USEFUL FOR FUTURE SURVEYS.

SECRET

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PAGE 02-02

IN 889961

TOR:141553Z APR 76

LIMA 32942

3. NO FILE. E2 IMPDET

S E C R E T

CLASSIFICATION

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PAGE 01-01

IN 963669

TOR: 281314Z JUN 76

ADDI 30375

SECRET 281305Z JUN 76 STAFF

CITE ADDIS ABABA 30375

TO: DIRECTOR,

WISH COMMEND MESSERS PICCOLO AND THOMPSON FOR EXCELLENT PROFESSIONAL WORK IN ADDIS ABABA. DURING RECENT CI SURVEY, BOTH OFFICERS MADE DETAILED STUDIES OF CASES, FILES AND STATION ACTIVITIES THAT RESULTED IN SOUND ORAL RECOMMENDATIONS FOR IMPROVEMENT. WE ARE IMPLEMENTING THESE RECOMMENDATIONS AT ONCE. SURVEY WAS EXTREMELY VALUABLE FOR ALL STATION PERSONNEL. E2 IMPDET

Joseph I Piccolo

SECRET

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Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

**FILE
PUNCHED
BY**

SERIAL NO.

NAME

1-8

LAST

FIRST

(Print)

7-28

025658

PUNCELO

JOSEPH

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. 56, 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		CODE				CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic)	37	38	39		40-42
						2 - CORRECTION					
						3 - CANCELLATION					

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE				CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic)	37	38	39	WESTERN	40-42
03	22	76	04	11	76	4 - CORRECTION	2			HERMISHERE	811
						5 - CANCELLATION					

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

CI 76-76

DOCUMENT DATE/PERIOD

3/22/76

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCS	DATE 4/28/76	SIGNATURE C. W. L. L.
AS L DIVISION, CTR.		
C & P DIVISION		

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T 839692		EIA497		PAGE 21	
				IN 889961	
		TOR:141553Z APR 76		LIMA 32942	

SECRET 141519Z APR 76 STAFF

CITE LIMA 32942

TO: DIRECTOR,

RYBAT SGCHART

1. WISH COMPLIMENT MESSRS. PICCOLO AND SILED ON THEIR HANDLING OF CI SURVEY AT LIMA. THEY WERE WELL PREPARED IN ADVANCE, WORKED HARD HERE, AND WERE VERY SELF SUFFICIENT. CAUSING MINIMUM DISRUPTION OF STATION ACTIVITIES. THEY DUG DEEPLY BUT MADE A GREAT EFFORT TO BE CONSTRUCTIVE AT ALL TIMES, RATHER THAN JUST PLAIN CRITICAL. ONCE WE GOT GOING THE FEELING THAT WE WERE BEING INSPECTED QUICKLY DISAPPEARED AND WAS REPLACED BY ONE OF TEAMWORK.

2. ASIDE FROM PROVIDING HQS WITH OUR CI PROFILE. BENEFITS ACCRUED TO THE STATION FROM THE SURVEY. IT MOTIVATED A USEFUL SELF-ANALYSIS BEFORE THE TEAM ARRIVED. THE TEAM'S STUDY OF HQS FILES, WHICH MOST OF US HAD NEVER READ, UNCOVERED VARIOUS INDICATORS WHICH GAVE BETTER PERSPECTIVE TO MANY OF OUR CASES. THE INFORMAL FRANK DISCUSSIONS RESULTED IN A NUMBER OF IDEAS FOR CHASES WHICH WE WILL MAKE. WE LOOK FORWARD TO RECEIVING THE TEAM'S FORMAL REPORT, AT WHICH TIME WE WILL COMMENT ON ACTIONS TAKEN AND PLANNED. AND PROVIDE A FEW IDEAS WHICH MIGHT BE USEFUL FOR FUTURE SURVEYS.

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PAGE 22-02

IN 889961

TOR:141553Z APR 76

LIMA 32942

3. NO FILE. E2 IMPDET

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14-00000

SECRET

22 December 1975

MEMORANDUM FOR: Chief, LA Division

SUBJECT : Mr. Joseph S. Piccolo - Completion of Senior
Operations Course #2/76

1. Mr. Piccolo attended the Senior Operations Course from 3 November to 12 December 1975 (SOC #2/76). Individual student grades and class rankings have not been used to evaluate student performance. The diverse background of the students and the nature of the course material used in the SOC preclude formal testing. This memorandum attests to Mr. Piccolo's satisfactory completion of the course.

2. During the six weeks of the course, 59% of the time was devoted to subjects and activities directly related to operations, including 30% devoted to "hands-on" time with technical equipment and "on-the-street" practice of tradecraft. 31% of the time was devoted to material broadly categorized as "ops management," including about 10% on the Soviet and China targets. The final 10% of the time was devoted to subjects categorized as "management overview and ops support," which consisted of meetings with DO division and staff chiefs and visits to labs and other ops support facilities in the Headquarters area. The ten officers in the class ranged in grade from GS-12 to GS-14 (average grade 12.9), average age was 43.6 (Mr. Piccolo's age is 40). The class members' average years of Agency service was 16.8, and their average years of overseas service was 9.2.

3. The six weeks, normally 30 days of instruction time, was shortened to 28 days by the Thanksgiving Day weekend. Of these 28 days, Mr. Piccolo spent six days in intensive training in Persuasion and Manipulation Skills as taught in the SAI system. He spent approximately another eight and one-half days on technical tradecraft (photo, audio, and commo equipment familiarization and usage) and street tradecraft (surveillance, car toss, dead drop, brush pass, etc.) including three days intensive practice of these skills in a live exercise conducted in Richmond. Another five days were spent at Headquarters meeting with the chiefs of all DO divisions and staffs, and visiting three operational support laboratories in the metropolitan area. The approximately eight and one-half remaining days were consumed by a combination of miscellaneous operations management subjects, student seminars, and term paper writing (though the latter was accomplished mostly on the students' own time). This running of the course was keyed by remarks by the ADDO, and the Headquarters week was climaxed by an hour and a half with the DDO. The guest speaker at the graduation dinner of SOC #2/76 was Agency Historian Dr. Walter Pforzheimer.

E2 IMPDET
CI. by 056184

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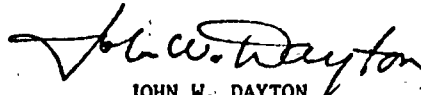
SECRET

SUBJECT: Mr. Joseph S. Piccolo - Completion of Senior Operations Course #2/76

4. Mr. Piccolo, as a 40-year-old GS-13/4, was at about the average age for this class and slightly above average in grade. Although formal grades are not given to graduates of the SOC, it was the consensus of DTS staff instructors involved in SOC #2/76 that Mr. Piccolo would almost certainly rank number one in this particular group. Bringing to the class broad operational experience and understanding, Mr. Piccolo was an active participant in the six-day SAI block of instruction and made contributions based on his own operational past. The tradecraft instructors who conducted the live problem in Richmond described Mr. Piccolo as the best student in street tradecraft. One of the Course Coordinators commented that Mr. Piccolo, "exhibited, more than any of the others, the ability to lead the group." Mr. Piccolo's term paper on the subject of how a NOC station might be established in Rio de Janeiro was careful and thorough and was described by the panel as "an excellent overall plan." To a man of Mr. Piccolo's experience, at least some of the course may have seemed a little basic or redundant, but he never let it show, and always took part with the same enthusiasm as the more junior members of the class.

5. A copy of this memorandum is being placed in Mr. Piccolo's official personnel file.

FOR THE DIRECTOR OF TRAINING:


JOHN W. DAYTON
Course Coordinator
Senior Operations Course

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Internal Use Only

REPORT OF SERVICE ABROAD

**FILE
PUNCHED
BY**

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 655939	(Print) Pecora	Joseph	5

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	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
			0	8	08	1			Nicaragua

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				
25-26	27-28	29-30	31-32	33-34	35-36	1 - TDY (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38	39

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SOURCE DOCUMENT AND CERTIFICATION

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CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

IN 655939

DOCUMENT DATE/PIS/100

11 Aug '75

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITE
1 - O & DIVISION LTOR.	DATE	SIGNATURE
1 - O & DIVISION	8/15/75	[Signature]

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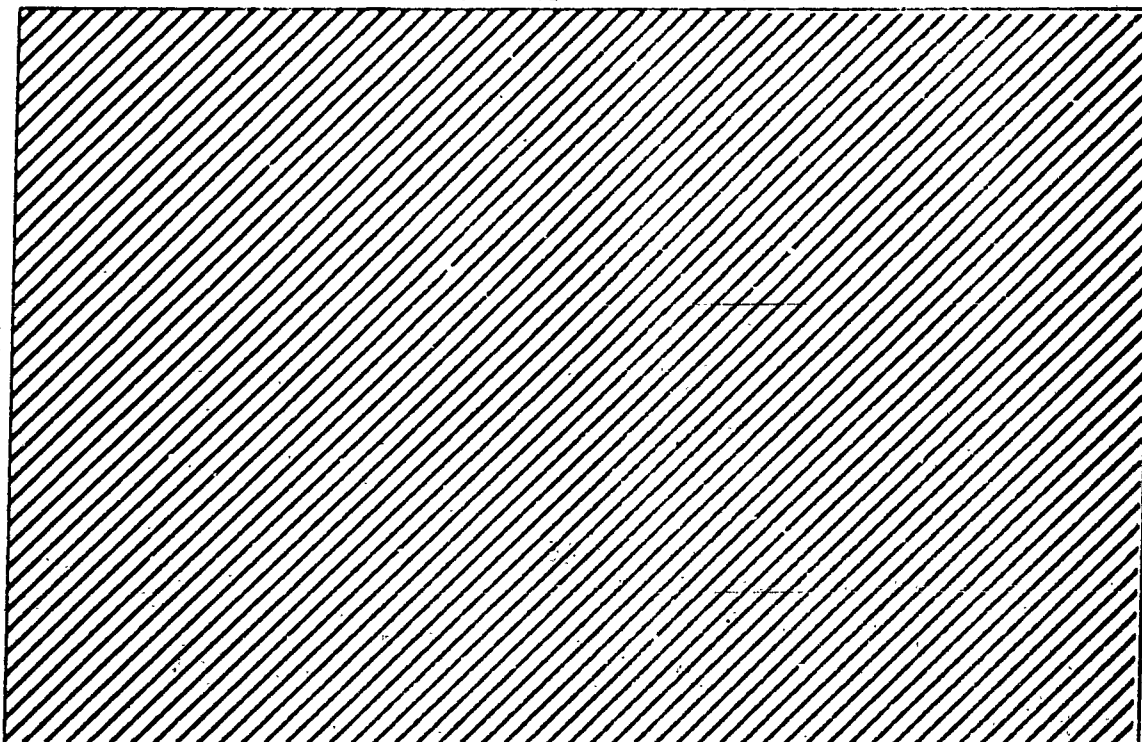
FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE FOR HEADQUARTERS USE ONLY			
NAME OF EMPLOYEE		DATE (From Item 5-1)	NAME OF SUPERVISOR
Joseph Piccolo		11 Sep 74	Raymond Swider
DATE REPORTED TO HEADQUARTERS		DATE OF LAST FIELD SERVICE	DATE OF LAST ASSIGNMENT
23 September 1974		10/11/74	11 Sep 74
DESIGN		STATION OR BASE	CURRENT COVER
D		Managua	
8 Dec 35		Ops Officer/DCOS	
CS-13			
TO BE COMPLETED BY EMPLOYEE			
1A. DATE OF PCS ARRIVAL IN FIELD	1B. REQUESTED DATE OF DEPARTURE	1C. EXPECTED DATE OF FIRST CHECK-IN AT HQ	1D. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE
20 Sept 1973	5 Jan 1976	19 Jan 1976	5 March 1976
2. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:			
Three (3) Dependents Ages: 32, 5 and 4			
3. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:			
Adequate medical facilities or a reasonable proximity to them.			
4. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form).			
Deputy Chief of Station, supervising/managing - support/finance and records personnel and activities, handling Liaison with the indigenous Security Service, managing operations directed at penetrating the political left and terrorist movement, and handling the Principal Agent (HOC) presently employed at the Station.			
5. TRAINING DESIRED INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS			
Training should be keyed to provide an even broader base for the continued development of my overall management skills and potential which have initially developed through on the job application. Courses should be those available to supervisory level personnel.			
An Operational Training requirement that should be satisfied as soon as possible is the Soviet Operations Course.			

SECRET

5. PREFERENCE FOR NEXT ASSIGNMENT	
5A. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT. I am interested in remaining in the "managerial cone" and in obtaining a position that will give me increased responsibility as well as career growth through promotion. Based on my experience and performance as Acting Chief of Station Managua for two months in 1968, Deputy Chief of Base Rio de Janeiro for the last 10 months of my tour in 1972-73 and present assignment as Deputy Chief of Station Managua, I request assignment to a position which entails supervision of several employees and requires exercise of managerial skills and judgement. If assigned to another tour overseas, a position as Deputy Chief of Station in a medium to large size Station would be preferred. If assigned to Headquarters, I would like to work where an overview of the related operational and managerial activities can be experienced. If the above assignments are not available, a tour which would broaden my operational knowledge would be desired. <u>ie: SA Division, China Ops activity or OTS</u>	
5B. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, 3 OR 4 (for 1st, 2nd, 3rd and 4th choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.	
<input checked="" type="checkbox"/>	EXTEND TOUR <u>3</u> MONTHS AT CURRENT STATION TO <u>5 January 1976</u> (DATE)
<input type="checkbox"/>	BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE. 1ST CHOICE <u>FI STAFF</u> 2ND CHOICE <u>SA Division</u> 3RD CHOICE <u>WH Division</u>
<input checked="" type="checkbox"/>	BE ASSIGNED TO ANOTHER FIELD STATION. INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION. 1ST CHOICE <u>WH Division</u> 2ND CHOICE <u>EUR Division</u> 3RD CHOICE <u>SA Division</u>
<input type="checkbox"/>	RETURN TO MY CURRENT STATION.
PREPARE UPDATING OF PERSONAL SECURITY INFORMATION IN ACCORDANCE WITH DOI-F 240-B AND FORWARD UNDER SEPARATE COVER. INDICATE DATE FORWARDED OR TO BE FORWARDED.	
TO BE COMPLETED BY FIELD STATION	
7. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING: Given his steady, reliable and productive performance, every effort should be made to accommodate his expressed preferences. There can be no doubt that by temperament and experience he would be of greater value to the Organization in the field rather than at Headquarters, but a tour at Headquarters does appear timely now, following the past 5 years in the field. I do not honestly know how he will perform in Staff work, being a Field Station activist, but the experience should have a further broadening effect upon him.	
TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE	
8. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.	
Subject has been approved for assignment to Headquarters, LA/COG.	
DATE <u>24 Jul 76</u> TITLE <u>C/LA/Pers</u>	SIGNATURE <u>H.L. Berthold</u>
FOR USE BY CAREER SERVICE	
9. APPROVED ASSIGNMENT:	
10. EMPLOYEE NOTIFIED BY DISPATCH NO. _____ DATED _____	CABLE NO. _____ DATED _____
CAREER SERVICE REPRESENTATIVE _____ DATE _____	

SECRET

ADMINISTRATIVE - INTERNAL USE ONLY



NAME OF EMPLOYEE (Last-First-Middle) PICCOLO, Joseph S., JR.	NAME AND RELATIONSHIP OF DEPENDENT W-Norma	CLAIM NUMBER 76-0015
--	--	--------------------------------

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 4/21/75.

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	SIGNATURE OF PNL REPRESENTATIVE <i>Edward J. ...</i>
----------------	---

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 7-24	MIDDLE
025658	LIPOGLU	TOROS	S

INSTRUCTIONS

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PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE	
MONTH 25-26	DAY 27-28	YEAR 29-30	MONTH 31-32	DAY 33-34	YEAR 35-36						1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION
			07	13	73		1			BRAZIL	090

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH 25-26	DAY 27-28	YEAR 29-30	MONTH 31-32	DAY 33-34	YEAR 35-36					

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. RIPD 19355	DOCUMENT DATE/PERIOD 2/13/73
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REMARKS

PREPARED BY DEC	REPORT SUBMITTED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
E & L DIVISION (TYP.)	DATE 4/16/73	SIGNATURE <i>[Signature]</i>
E & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET

1. NAME (Last, First, Middle) Piccolo, Joseph S.		2. DATE OF BIRTH 12/08/35		3. GRADE GS-13	
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDO/WH/Rio de Janeiro		5. PRESENT POSITION Ops Officer		6. EMPLOYEE EXTENSION 5671	
7. PROPOSED STATION Managua, Nicaragua		8. PROPOSED POSITION (Title, Number, Grade) Ops Officer 0506 GS-13			
9. TYPE OF COVER AT NEW STATION State SSN# 265 44 1914		10. ESTIMATED DATE OF DEPARTURE 09/10/73		11. NO. OF DEPENDENTS TO ACCOMPANY three	
12. COMMENTS Physicals to be taken in the field.					
13. DATE OF REQUEST 18 May 1973		14. SIGNATURE OF REQUESTING OFFICIAL Karl Fleck		15. ROOM NUMBER AND BUILDING 3D 5317 Hqs	
16. EXTENSION 5671					
17. OFFICE OF MEDICAL SERVICES DISPOSITION Qualified overseas PCS. 25 July 1973 William T. Golder OMS/pro					
18. OFFICE OF SECURITY DISPOSITION					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION					
REQUEST FOR PCS OVERSEAS EVALUATION					

FORM 250a USE PREVIOUS EDITIONS

SECRET

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WH 1

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
NAME OF EMPLOYEE (Use pseudo only if SA)		DATE (from item 5-1)	NAME OF SUPERVISOR (if any)	DATE (from item 5-2)
Piccolo, Joseph		9 Nov 1971	David Mc Grath	9 Nov 1971
DATE RECEIVED AT HEADQUARTERS:		DISPATCH NUMBER:		
18 November 1971		HBRT 8679, 11 Nov 71		
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
8 Dec 35	D	Ops Officer/Chief FI Brazil, GS-12	Rio de Janeiro	LNGOLD
6A. DATE OF PCS ARRIVAL IN FIELD	6B. REQUESTED DATE OF DEPARTURE	6C. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6D. USHIRT DATE TO REPORT TO DUTY AFTER LEAVE	
23 June 70	30 June 73	15 July 73	15 September 73	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
3 Dependents ages: 29, 3, 2				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
None.				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P 345-8)				
<p>Chief, FI for Brazil (Coordinating activities of Station and Bases). Ops Officer for Communist Party Operations. Ops Officer for Revolutionary Terrorist Operational Activities. Supervisor for one full time inside and one full time outside Operations Officer and related FI activities of several Base Officers.</p>				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
<p>Advanced Operations Course. Management Courses in Preparation for assuming positions of increased supervisory responsibility.</p>				

FORM 301

SECRET

101

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT.

11A. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

Deputy Chief of Station of a small Station or Senior FI Officer position with supervisory responsibilities at a large Station. These choices for next assignment are made on the basis of the increasing responsibility of positions I have held as my career has developed. This career has included experience in most types of FI and CI operations as well as some CA activities. It has also provided me with supervisory experience, including Acting Chief of Station for a two month period. Assignment to a position of greater responsibility is desirable for the continued development of my career.

11B. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

☒ 1. EXTEND TOUR 12 MONTHS AT CURRENT STATION TO 30 June 1973
(DATE)

☒ 3. BE ASSIGNED TO DUTY FOR A TOUR OF DUTY; INDICATE YOUR CHOICE OF DIVISION, STATE OR OFFICE.
1ST CHOICE WH 2ND CHOICE OTR 3RD CHOICE EUR

☒ 2. BE ASSIGNED TO ANOTHER FIELD STATION; INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION
1ST CHOICE WH/Central 2ND CHOICE Mexico 3RD CHOICE Spain

☒ 4. RETURN TO MY CURRENT STATION
America, Costa Rica

TO BE COMPLETED BY FIELD STATION

IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

COB Comment: I recommend that Subject's desire for a 12-month extension be honored. His other choices also appear sound as alternatives.

COS Comment: COS strongly recommends that Subject extend for one year. He is handling an extremely important agent, and we would hate to change this relationship now. After one year, however, Subject's career would best be served by a new assignment.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

Per HBRS 4729, Subject's request for a one year's extension of tour is approved.

DATE 6 Dec 71 TITLE C/WH/Pers SIGNATURE Henry L. Berthold

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. _____ DATED _____

CABLE NO. _____ DATED _____

CAREER SERVICE REPRESENTATIVE: _____

SECRET

CONFIDENTIAL

(When Filled In)

Complete in original. The data recorded on this form is essential in determining travel expenses allowable in connection with leave at government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) (First) (Middle) SOCIAL SECURITY NUMBER
Piccolo, Joseph Stephen 265-44-1814

1. RESIDENCE DATA

PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY Washington, D.C. LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad) N/A
 PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE Farmington, VA. HOME LEAVE RESIDENCE Farmington, VA.

2. MARITAL STATUS (Check one)

☐ SINGLE ☒ MARRIED ☐ SEPARATED ☐ DIVORCED ☐ WIDOWED ☐ ANNULLED

IF MARRIED, PLACE OF MARRIAGE Falls Church, VA. DATE OF MARRIAGE 14 Feb 67

IF DIVORCED, PLACE OF DIVORCE DECREE N/A DATE OF DECREE

IF WIDOWED, PLACE SPOUSE DIED N/A DATE SPOUSE DIED

IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)

N/A

3. MEMBERS OF FAMILY

NAME OF SPOUSE Norma W. Piccolo ADDRESS (No. Street City, State Zip Code) 10609 SPRINGMANN DR. FARMINGTON, VA. 22030 TELEPHONE NO. 591-9059

NAMES OF CHILDREN NORAMUNDY DAWN ADDRESS " " SEX Female DATE OF BIRTH 23 Feb 70

NAME OF YOUR FATHER (Or male guardian) Joseph Piccolo ADDRESS 1636 N.E. 20th ST. FT. LAUDERDALE, FLA. 33305 TELEPHONE NO. (706) 564-5834

NAME OF YOUR MOTHER (Or female guardian) Ernest R. Piccolo ADDRESS " " 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? Parents and In-Laws

4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Mr., Mrs., Miss) (Last-First-Middle) Piccolo, ERNEST R. RELATIONSHIP Mother

HOME ADDRESS (No. Street City, State Zip Code) 1636 N.E. 20th ST. FT. LAUDERDALE, FLA. HOME TELEPHONE NUMBER (305) 564-5834

BUSINESS ADDRESS (No. Street City, State Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE N/A BUSINESS TELEPHONE & EXTENSION

IS THE INDIVIDUAL NAMED ABOVE WITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization (can be believed you were told)) YES ☒ NO ☐

IS THIS 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 ☐

DOES THIS INDIVIDUAL SWORN THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY SUCCESSION? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.) YES ☒ NO ☐

The persons named in item 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE OF CAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM

CONFIDENTIAL - NO REPRODUCTION

CURRENT RESIDENCE AND DEPENDENCY REPORT

CONFIDENTIAL

(When Filled In)

9. 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.		
POTOMAC Bank and TRUST Co. (checking & Savings) Fairfax, VA. 22030 Joseph S. Piccolo JR. Norma W. Piccolo		
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 checked="" type="checkbox"/> YES	<input 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?)		
Safe Deposit Box, Potomac Bank & Trust Co. Fairfax, VA.		
HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If "Yes" give name(s) and address)		
HAVE YOU EXECUTED A POWER OF ATTORNEY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes", who possesses the power of attorney?)		
Wife		
10. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS		
Re: Item #4 - Contact for Emergency should follow the below order A. Wife (Item 3) B. Mother (Item 4) C. In-Laws MR. Norman H. WYATT Rte 2 Box 342 B Manassas, VA. 22110 Tel. (703) 368-9761		
SIGNED BY	DATE	SIGNATURE
Wash D.C.	20 May 70	Joseph S. Piccolo JR.

CONFIDENTIAL

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD										FILE			
TO: Office of Personnel, Transactions and Records Branch, Status Section										<div style="border: 1px solid black; padding: 5px; text-align: center;"> PUNCHED <i>BY S</i> </div>			
SERIAL NO.		NAME											
		LAST		FIRST		MIDDLE							
1-6 <i>025658</i>		(Print) <i>Piccolo, Joseph 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. 55, 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				CODE			CODE	
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION			37	38	39	40-42	
<i>06</i>	<i>23</i>	<i>70</i>							<i>1</i>			<i>Brazil</i> <i>CSIC</i>	
TDY DATES OF SERVICE													
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREA(S)		
MONTH	DAY	YEAR	MONTH	DAY	YEAR				CODE			CODE	
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													
TRAVEL VOUCHER						DISPATCH							
<input checked="" type="checkbox"/> CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT							
OTHER (Specify)													
DOCUMENT IDENTIFICATION NO. <i>2420032</i>						DOCUMENT DATE/PERIOD <i>24, June 70</i>							
REMARKS													
PREPARED BY			REPORT SUBMITTED TO			ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED							
SEE			DATE			SIGNATURE							
1. B. L. DIVISION STAFF			<i>8 10</i>			<i>[Signature]</i>							
1. B. L. DIVISION													
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER													

FORM 1451a

SECRET

16-101

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	(Print)	7-26		
025658	Piccolo	Joseph	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		O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	CODE	ONLY	37	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION					40-42
			01	1	469	1					525

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	CODE	ONLY	37	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - 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)			

DOCUMENT IDENTIFICATION NO. **EN 65783** DOCUMENT DATE/PERIOD **6 January 1969**

REMARKS

PREPARED BY		REPORT ANNOTATED ON CONTROL DOCUMENT		ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED	
DEC		DATE		SIGNATURE	
C & A DIVISION, CTBB.		11/23/68		F. J. L. L. L. L.	
L & T DIVISION					

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

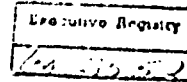


TREASURY DEPARTMENT
UNITED STATES SECRET SERVICE

OFFICE OF THE DIRECTOR

WASHINGTON, D.C. 20226

August 1, 1968



The Honorable
Richard M. Holms
Director
Central Intelligence Agency
McLean, Virginia

Dear Dick:

As you know, the President and Mrs. Johnson visited Managua, Nicaragua on Monday, July 8, 1968, upon their return from the San Salvador Conference.

Assistant to the Special Agent in Charge Ronald M. Pontius of the Presidential Protective Division, has informed me that Mr. Joseph Piccolo and Mr. Carl Jenkins were of particular assistance in establishing and coordinating the relations with the Nicaraguan security organizations, and President Somoza's staff. Mrs. Elizabeth Jenkin's assistance as an interpreter was also greatly appreciated.

Personally and on behalf of the United States Secret Service, I wish to extend my sincere appreciation and thanks to the above mentioned personnel for the capable and professional manner in which they performed their duties.

Sincerely,

James J. Rowley

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
Piccolo	Joseph	S.	Dec 8, 35	265 44 1914
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)	

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



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



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



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)

DATE

15 Mar 68

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

OFFICE OF PERSONNEL
GENERAL INVESTIGATIVE
DIVISION

20 MAR 68 1 19 PM '68

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM NO. 176-1
JANUARY 1968
(Use one only until April 10, 1968;
176-1a)

INSTRUCTIONS TO EMPLOYING AGENCY

1. **Who must file.**—All employees not excluded by law or regulation from insurance coverage, including those who have previously waived coverage, are required to complete and file Standard Form 176-T. Employees who are in the service on February 14, 1968, as well as those who are appointed after that date but before April 14, 1968, must file the form.
2. **Automatic cancellation of previously filed waivers.**—All "Waivers of Life Insurance Coverage" (SF 53) on file are automatically canceled as of the first day of the first pay period beginning on or after February 14, 1968. Payroll offices are to begin regular insurance deductions on the automatic cancellation date for employees who do not file a new waiver, i.e., those who do not check box C of SF 176-T, on or before that date.
3. **Employees failing to file.**—If an employee does not return a completed SF 176-T, contact him and urge him to do so even if he does not want optional insurance (he will, of course, be automatically covered for regular insurance). If he still fails to file SF 176-T by April 14, 1968, or 31 days after appointment, whichever is later, file one for him as of that date: mark box B, and note in the space provided for his signature "employee contacted—failed to elect optional insurance." See note 2 below.
4. **Review of completed forms.**—(a) Review both copies of the SF 176-T for legibility, completeness, and consistency. Reconcile with the employee any obvious major discrepancy such as a mark in more than one box.
(b) If the employee marked box A or box C, make sure the Statistical Stub is complete. Then detach and mail stubs, in a bundle, weekly to:
Office of Federal Employees' Group Life Insurance
(Statistical Study)
4 East 24th Street
New York, New York 10010
(c) If the employee marked box B, detach and destroy the stub.
5. **Date of receipt and effective date.**—(a) Stamp date of receipt by employing office in the space provided for this purpose on both the Original and the Duplicate.
(b) The effective date is determined from the table below.
6. **Disposition of forms.**—(a) File the Original SF 176-T in the official personnel folder in all cases.
(b) Any necessary payroll change, with effective date, may be posted in the space reserved on the Duplicate for employing office.
(c) The Duplicate may be destroyed, if no payroll action is required, or after the requirements of the agency's payroll system have been met.
7. **Use of SF 176-T.**—SF 176-T "Election, Declination, or Waiver of Life Insurance Coverage" should not be used after the initial filing period (after April 14, 1968). A revised edition will be available for use after that date.

TABLE OF EFFECTIVE DATES

DATE SF 176-T RECEIVED BY EMPLOYING OFFICE	EMPLOYEE'S DECISION	EFFECTIVE DATE (IF NO WAIVER SF 53, IN EFFECT)	
		OF DECISION	OF DEDUCTIONS
On or before February 14, 1968.	Elects optional (in addition to regular) (box A).	Coverage effective February 14, 1968	Deductions begin 1st day of 1st pay period beginning on or after February 14, 1968
	Declines optional (but not regular) (box B).	Declination effective February 14, 1968.	
	Waives regular (so ineligible for optional) (box C).	Waiver effective last day of pay period in which February 14, 1968 falls.	Deductions stop last day of pay period in which February 14, 1968 falls.
After February 14 but not later than April 14, 1968.	Elects optional (in addition to regular) (box A).	Coverage effective on date of receipt	Deductions begin 1st day of 1st pay period beginning on or after date of receipt
	Declines optional (but not regular) (box B).	Declination effective on date of receipt, but employee loses automatic optional protection on February 14, 1968	
	Cancels previously elected optional (but not regular) (box B)	Cancellation effective last day of pay period in which received	Deductions for optional stop last day of pay period in which received
	Waives regular (so ineligible for optional) (box C)	Waiver effective last day of pay period in which received	Deductions stop last day of pay period in which received

- NOTES: 1 Deductions regular insurance coverage and deductions are automatic unless waived (by checking box C). A and B elections do not affect regular insurance effective dates.
- 2 An employee for whom the agency files SF 176-T because he failed to file is deemed to have declined optional but not regular insurance.
- 3 An employee with an unexpired waiver (SF 53) on file cannot be insured any earlier than the first day he is on duty and one starts in a pay period beginning on or after February 14, 1968, filing of an SF 176-T before that date will not cancel an SF 53 any earlier. Deductions begin the day he becomes insured.
- 4 The effective date of regular (and optional) insurance coverage for an employee who has been on leave without pay for more than 1 year is the first pay day he is on pay and duty status. Deductions are effective the same day.

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	NAME									
	LAST	FIRST	MIDDLE							
1-8	7-24									
025658	Piccolo	Joseph	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	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) 3 - CORRECTION 5 - CANCELLATION	37	38	39	40-42
			01	20	68		1			MEXICO 450
TDY DATES OF SERVICE										
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	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										
TRAVEL VOUCHER	DISPATCH									
<input checked="" type="checkbox"/> CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT									
OTHER (Specify)										
DOCUMENT IDENTIFICATION NO. 35014						DOCUMENT DATE/PERIOD 01/22/68				
REMARKS										
PREPARED BY			REPORT SUBMITTED ON (attach document)			ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED				
1 - 0 - 1 DIVISION			DATE 1-24-68			SIGNATURE				
1 - 0 - 1 DIVISION										
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER										

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
NAME OF EMPLOYEE (use pseudo only if SA)	DATE (from item 5.1)	NAME OF SUPERVISOR (true)	DATE (from item 5.2)	
Joseph Piccolo	16 March 1967	Francis Sherry	16 March 1967	
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:		
	HMGT 7713	11 MAY 1967		
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
8 Dec 35	D	PERUMEN Section/ Operations Officer GS-11	Mexico City	LNGOLD
6. DATE OF PCB ARRIVAL IN FIELD	7. REQUESTED DATE OF DEPARTURE	8. EXPECTED DATE OF FIRST CHECK-IN AT HQ	9. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
29 Sept. 65	31 Jan 68	8 Feb 68	15 April 1968	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
One, age 24				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING REAT ASSIGNMENT:				
Due to continued health problems, (a high splenic flecture of the colon) a post at an altitude lower than Mexico City would be desirable. Although this illness has not impaired my ability to perform my work, it has put a strain on me and it is disconcerting not to feel completely up to par for extended periods of time.				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P. 240-8)				
Operations officer in the PERUMEN section responsible for a refugee debriefing center, unilateral FI assets directed against PERUMEN, double-agents and other CI assets directed against PERUMEN, a photographic support operation, and a small CA leaflet harrassment operation.				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
1. Audio Surveillance Management 2. CA Propaganda Activities 3. Counterintelligence Operations				

FORM 202

SECRET

(4)

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT. <u>Operations Officer Western Hemisphere Division</u>	
11A. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.	
<p>To date, I have worked in operational activities of primarily CI and FI orientation with a greater emphasis on the former. In order to round out my early career stage as an operations officer, an assignment with more CA orientation would be beneficial.</p> <p>If available, my grade not withstanding, an assignment as supervisor of a section or as Chief of Base would be desirable in preparation for the eventual assumption of duties with higher responsibility in the future.</p>	
11B. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, & 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.	
<input checked="" type="checkbox"/>	EXTEND TOUR <u>Three</u> MONTHS AT CURRENT STATION TO <u>31 January 1968</u> . (DATE)
<input checked="" type="checkbox"/>	BE ASSIGNED TO HQTRS FOR A TOUR OF DUTY; INDICATE YOUR CHOICE OF DIVISION, STAGE OR OFFICE. 1ST CHOICE <u>WHD</u> 2ND CHOICE <u>WED</u> 3RD CHOICE <u>TRAINING</u>
<input checked="" type="checkbox"/>	BE ASSIGNED TO ANOTHER FIELD STATION; INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION 1ST CHOICE <u>Managua</u> 2ND CHOICE <u>Madrid</u> 3RD CHOICE <u>Rio de Janeiro</u>
<input checked="" type="checkbox"/>	RETURN TO MY CURRENT STATION
TO BE COMPLETED BY FIELD STATION	
12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:	
<p>It is recommended, primarily because of problems of health (at the high altitude in this post) that this officer be allowed one of the choices he has listed under 11 B. The departure of this officer will mean a loss to the operational capacity of his Section; and it is with regret that Chief of Station, Mexico City concurs with his request for re-assignment.</p>	
TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE	
13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.	
<p>WH Division proposes that Mr. Piccolo be extended to December 1967. He will then be assigned to Managua under non-official cover replacing James D. ZABOTH.</p>	
DATE <u>10 May 67</u> TITLE <u>C/WH/Pers</u> SIGNATURE <u>Robert D. Cashman</u>	
FOR USE BY CAREER SERVICE	
14. APPROVED ASSIGNMENT: <u>7 Sept Term = Managua. Estimated 6 Dec 67 approx 1.</u>	
15. EMPLOYEE NOTIFIED BY DISPATCH NO. <u>77777</u> DATED: <u>11 May 67</u>	
CABLE NO. _____ DATED: _____	
CAREER SERVICE REPRESENTATIVE: <u>Robert M. Zabolte</u> DATE: <u>11 May 67</u>	

SECRET

Standard Form No. 2809 U.S. Civil Service Commission FPM Supplement 850-1 November 1965		HEALTH BENEFITS REGISTRATION FORM FEDERAL EMPLOYEES HEALTH BENEFITS PROGRAM <small>(And instructions on back of last page. See also Form SF 2809-1.)</small>			New Carrier's Control No. 9535981 Old Carrier's Control No. 0-1-1																																			
TO EMPLOYING OFFICE: SHOW OLD CARRIER'S CONTROL NUMBER UNLESS ELECTION IS TO CANCEL ENROLLMENT OR TO CHANGE OPTIONS OR TYPE OF ENROLLMENT IN THE SAME PLAN.																																								
PART A ALL WHO REGISTER MUST FILL IN THIS PART.		1. NAME (LAST) (FIRST) (MIDDLE INITIAL) Piccolo Joseph S		2. DATE OF BIRTH (Use numbers) <table border="1" style="width: 100%; text-align: center;"> <tr> <td>MONTH</td> <td>DAY</td> <td>YEAR</td> </tr> <tr> <td>12</td> <td>8</td> <td>35</td> </tr> </table>		MONTH	DAY	YEAR	12	8	35	3. ARE YOU NOW MARRIED? YES <input checked="" type="checkbox"/> 1 NO <input type="checkbox"/> 2																												
		MONTH	DAY	YEAR																																				
12	8	35																																						
4. YOUR MAILING ADDRESS (NUMBER AND STREET) (CITY) (STATE) (ZIP CODE) (Blank)		5. SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE																																						
IMPORTANT IT IS ILLEGAL FOR AN EMPLOYEE OR A MEMBER OF HIS FAMILY TO BE COVERED UNDER MORE THAN ONE ENROLLMENT. IF YOU ARE ALREADY COVERED THROUGH THE FAMILY ENROLLMENT OF ANOTHER FEDERAL OR DISTRICT OF COLUMBIA EMPLOYEE OR ANOTHER YOU MUST REQUEST NOT TO ENROLL OR THE OTHER ENROLLMENT MUST BE CANCELED OR CHANGED TO SELF ONLY. SIMILARLY, IF A FAMILY MEMBER LISTED ON YOU IN PART B IS COVERED THROUGH HIS (OR HER) OWN ENROLLMENT, YOU CANNOT ELECT A FAMILY ENROLLMENT UNLESS THE FAMILY MEMBER CANCELS HIS (OR HER) ENROLLMENT.																																								
PART B FILL IN THIS PART IF YOU WISH TO ENROLL OR CHANGE YOUR ENROLLMENT IN A HEALTH BENEFITS PLAN. If enrollment is for self only, answer item 1. If enrollment is for self and family, also answer item 2. IF YOU ARE CHANGING YOUR ENROLLMENT ALSO FILL IN PART D.		1. I elect to enroll in a health benefits plan as shown below. I authorize deductions from my salary, compensation, or annuity to cover my share of the cost of the enrollment. (Copy the information requested below from back page of this form of the plan you select.) <table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">NAME OF PLAN Piccolo</td> <td style="width: 20%;">OPTION (HIGH OR LOW) Low</td> <td style="width: 30%;">ENROLLMENT CODE NUMBER 4 2 2</td> </tr> </table>					NAME OF PLAN Piccolo	OPTION (HIGH OR LOW) Low	ENROLLMENT CODE NUMBER 4 2 2																															
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2. In space below list all eligible family members without exception; list your wife or husband first, then your unmarried children under age 21, including (a) legally adopted children and (b) stepchildren, foster children, and illegitimate children who live with you in a regular parent-child relationship. Include also any unmarried child over 21 who became disabled before age 21 and who, because of the disability, is incapable of self-support. (Attach a doctor's certificate for a disabled child age 21 or over if one is not already on file.) DO NOT LIST PARENTS OR OTHERS WHO ARE NOT ELIGIBLE FAMILY MEMBERS. THEY WILL NOT RECEIVE BENEFITS, EVEN IF THEY ARE DEPENDENT ON YOU AND ARE LISTED. <table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th colspan="2">NAMES OF FAMILY MEMBERS</th> <th>DATE OF BIRTH (Month, Day, Year)</th> <th colspan="2">NAMES OF FAMILY MEMBERS</th> <th>DATE OF BIRTH (Month, Day, Year)</th> </tr> </thead> <tbody> <tr> <td colspan="2">Wife of Husband Norma E</td> <td>OCT 29, 43</td> <td colspan="2"></td> <td>6</td> </tr> <tr> <td colspan="2"></td> <td></td> <td colspan="2"></td> <td>7</td> </tr> <tr> <td colspan="2"></td> <td></td> <td colspan="2"></td> <td>8</td> </tr> <tr> <td colspan="2"></td> <td></td> <td colspan="2"></td> <td>9</td> </tr> <tr> <td colspan="2"></td> <td></td> <td colspan="2"></td> <td>10</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 of Husband Norma E		OCT 29, 43			6						7						8						9						10
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					10																																			
PART C FILL IN THIS PART IF YOU WISH NOT TO ENROLL OR IF YOU WISH TO CANCEL YOUR ENROLLMENT.		PLACE AN "X" IN ITEM 1 OR 2, WHICHEVER APPLIES: 1. I ELECT NOT TO ENROLL IN A PLAN UNDER THE FEDERAL EMPLOYEES HEALTH BENEFITS ACT. <input type="checkbox"/>																																						
		2. I ELECT TO CANCEL MY PRESENT ENROLLMENT UNDER THE CODE NUMBER SHOWN BELOW. <table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">Present Enrollment Code Number</td> <td style="width: 50%;">(Blank)</td> </tr> </table>					Present Enrollment Code Number	(Blank)																																
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PART D FILL IN THIS PART, AS WELL AS PART B, TO CHANGE YOUR ENROLLMENT.		ANSWER ITEMS 1, 2, AND 3 TO SHOW ENROLLMENT CODE BEING CHANGED AND ELIGIBILITY FOR CHANGE. 1. ENROLLMENT CODE NUMBER OF PRESENT PLAN: 4 2 1																																						
		2. NUMBER OF EVENT WHICH PERMITS CHANGE (See table on back of duplicate for proper number): 2			3. DATE OF EVENT WHICH PERMITS CHANGE: <table border="1" style="width: 100%; text-align: center;"> <tr> <td>MONTH</td> <td>DAY</td> <td>YEAR</td> </tr> <tr> <td>2</td> <td>14</td> <td>67</td> </tr> </table>		MONTH	DAY	YEAR	2	14	67																												
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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 5 years, or both. (18 U.S.C. 1001.)																																						
		(YOUR SIGNATURE—DO NOT PRINT) (DATE) (Blank)																																						
PART F TO BE COMPLETED BY AGENCY.		1. NAME AND ADDRESS OF EMPLOYING OFFICE (Blank)		2. DATE RECEIVED BY EMPLOYING OFFICE 1-17-67																																				
		3. EFFECTIVE DATE OF ELECTION 1-12-67		4. PAYROLL OFFICE NO. (Blank)																																				
REMARKS FOR USE ONLY BY AGENCY		5. BY 2811 REPORT NO. (Blank)																																						
		(Blank)																																						