



# Questionnaire for Living Quarters Allowance (LQA) Determinations

## PRIVACY ACT STATEMENT

**AUTHORITY:** 5 U.S.C. §5923; and E.O. 9397 (SSN).

**PRINCIPAL PURPOSE(s):** Used to determine eligibility for overseas living quarters allowance.

**ROUTINE USE(S):** None.

**DISCLOSURE:** Voluntary; however, failure to provide the requested information may make it impossible to determine your eligibility for LQA, resulting in a default "ineligible" determination.

**CPAC Representative Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Title and grade of position offered: \_\_\_\_\_

Date position offered: \_\_\_\_\_ Location of position: \_\_\_\_\_

RPA Number: \_\_\_\_\_

Hard to fill position? Yes  No

Copy of resume forwarded (required) Yes

Copy of announcement? (Required if selection was competitive.) Yes  No

**The information you provide in this questionnaire will be used to determine your eligibility for LQA.**

**Name:** \_\_\_\_\_ **SSN:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Section A: Living/Work History**

List your current/former residences for a minimum of the last 2 years.

| From | To | Address |
|------|----|---------|
|      |    |         |
|      |    |         |
|      |    |         |
|      |    |         |

List your employers at the minimum for the last 2 years (if applicable). Include any periods of unemployment.

| From | To | Address |
|------|----|---------|
|      |    |         |
|      |    |         |
|      |    |         |
|      |    |         |

Have you been separated for cause from a previous employer?      Yes       No

If yes, explain:

**ALL ITEMS MUST BE COMPLETED**

**Section B**

DoDI 1400.25, Volume 1250, DoD Civilian Personnel Management System: Overseas Allowances and Differentials;  
<http://www.dtic.mil/whs/directives/corres/pdf/1400.25-V1250.pdf>

U.S. hire: A person who physically resided permanently in the United States or the Commonwealth of the Northern Mariana Islands from the time he or she applied for employment until and including the date he or she accepted a formal offer of employment.

Example: Employee was physically in Baghdad when applying for the position. Therefore, when asked, "Did you apply for the position while physically residing in the United States or one of the enumerated territories or possessions?" the answer is "No".

**FOUO When Filled In**

Did you apply for the position while physically residing\* in the United States or a U.S. possession\*\*? Yes  No

Did you receive the job offer while physically residing\* in the United States or a U.S. possession\*\*? Yes  No

Did you accept the job offer while physically residing\* in the United States or a U.S. possession\*\*? Yes  No

\* Meaning you must physically be within the borders of the United States (including the 50 States, the District of Columbia, Puerto Rico, and any U.S. territory or possession) at the time and not, for example, be working, or even visiting in another country outside the borders of the United States or its possessions.

\*\* The United States, the Commonwealth of Puerto Rico, the Commonwealth of Northern Mariana Islands, the former Canal Zone or a possession of the United States

Were you at any time, from application for the position until acceptance of the job offer, outside the United States (including the 50 States, the District of Columbia, Puerto Rico, and any U.S. territory or possession)? If so explain where, when, and why. Yes  No

Have you previously worked in the overseas area within the last 2 years? Yes  No

If "Yes" check all applicable boxes:

- Civil Service Employee
- Non-Appropriated Fund Employee
- Other – explain:

**Section C**

Please check all applicable statements:

- Military Separation – Overseas Separation (copy of DD214 needed)
- Contractor originally hired from the U.S. (copy of employment contract needed)
- Contractor who previously separated from military overseas (copy of both DD214 and employment contract needed)
- Family member who arrived OCONUS on spouse’s orders (attach copy of orders)
- N/A

**Section C1: Transfer from Another Overseas Federal Activity/Agency**

I am transferring from another overseas activity/agency, was originally recruited or hired from the U.S., the commonwealth of Puerto Rico, the commonwealth of Northern Mariana Islands, the former Canal Zone or a possession of the U.S. and am currently an LQA recipient or eligible to receive LQA (currently on TQSA, residing in Government quarters).

Yes                       No                       N/A

If yes, please provide a copy of the PCS orders from when you were originally recruited/hired from the U.S. and a copy of the SF-50 and last Leave and Earnings Statement (LES). Also complete the following:

Government agency that hired me: \_\_\_\_\_

Date I arrived: \_\_\_\_\_

City and state from which I transferred: \_\_\_\_\_

## Section C2: Military Service

Provide the following information from the DD214:

Place of entry into active duty (item 7a): \_\_\_\_\_

Duty station where separated (item 8b): \_\_\_\_\_

Separation date (mm/dd/yyyy): \_\_\_\_\_

I have a current return transportation agreement to the U.S. Yes  No

Recent statement from my transportation office is attached. Yes  No

Did you use any portion of your return transportation entitlement? Yes  No

If yes, please explain: \_\_\_\_\_

**Note: Attach a copy of DD214 or a copy of separation orders if DD214 is not available.**

N/A

## Section D: Temporary Active Duty

I am temporarily on active duty reserve status in the overseas area for contingency operations. Yes  No

If yes, provide date of arrival: \_\_\_\_\_

I was called to active duty reserve status while in the overseas area. Yes  No

If yes, provide effective date: \_\_\_\_\_

**Note: Attach copies of all orders.**

N/A

**Section E: Private Employer/Contractor**

Is your employer a United States firm, organization or interest; an international organization in which the United States Government participates; or a foreign government? Yes  No

With your current employer, did you apply for the position while physically\* in the United States or a U.S. territory/possession\*\*? Yes  No

Were you physically\* in the United States or a U.S. territory/possession\*\* when you received and when you accepted your current employment? Yes  No

City and state from which I was hired: \_\_\_\_\_

Did this employer pay for your transportation to move you overseas from the United States or a U.S. territory/possession\*\*? Yes  No

Does your employer provide you with return transportation back to the United States or a U.S. territory/possession\*\* upon successful completion of your employment obligation? Yes  No

Did you use any portion of your return transportation entitlement? Yes  No

If yes, please explain: \_\_\_\_\_

**Important: You must attach copies of all employment contracts and extensions if you changed employers while overseas.** These contracts need to be signed and dated by employee and company. (A contract is the employment document that stipulates your employment terms and conditions. It covers such information as salary, benefits, conditions of employment, etc. Offer letters are not contracts and neither is a statement given by the employer after the fact.)

\* Meaning you must physically be within the borders of the United States (including the 50 States, the District of Columbia, Puerto Rico, and any U.S. territory or possession) at the time and not, for example, be working, or even visiting in another country outside the borders of the United States or its possessions.

\*\* The United States, the Commonwealth of Puerto Rico, the Commonwealth of Northern Mariana Islands, the former Canal Zone or a possession of the United States

**FOUO When Filled In**

List all employment from date of arrival overseas:

N/A

| From | To | Employer Name and Address |
|------|----|---------------------------|
|      |    |                           |
|      |    |                           |
|      |    |                           |
|      |    |                           |
|      |    |                           |
|      |    |                           |
|      |    |                           |
|      |    |                           |

**Section F: Checklist of Required and Attached Documents**

- Copies of reserve orders (reservists)
- Copy of original orders from CONUS (transfers)
- Copy of LES (transfers)
- Copy of current SF-50 (transfers)
- DD214 (military)
- Transportation Statement (military/contractor)
- Copies of all employment contracts and extensions (contractors)

## Section G: Employee Certification

Certification: The information provided in this statement is true and correct to the best of my knowledge. I understand that if I provide false information I will be required to reimburse the Government for any amount I may have received; that I will be subject to disciplinary action that may result in termination of my employment; and that I may be subject to criminal action. I understand that eligibility determinations cannot be made based on incomplete information/documentation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Section H: CPAC Review

### 1<sup>st</sup> Level Review

|  |  |                          |            |                          |
|--|--|--------------------------|------------|--------------------------|
| Documentation complete:                      | Yes  | <input type="checkbox"/> | No         | <input type="checkbox"/> |
| Eligibility for LQA:                         | Eligible   | <input type="checkbox"/> | Ineligible | <input type="checkbox"/> |
| Notes:                                       | <div style="border: 1px solid black; height: 80px;"></div> |                          |            |                          |
| _____<br>1 <sup>st</sup> Level Reviewer Name | _____<br>Signature   | _____<br>Date            |            |                          |

### 2<sup>nd</sup> Level Review

|  |  |                          |            |                          |
|--|--|--------------------------|------------|--------------------------|
| Eligibility for LQA:                         | Eligible   | <input type="checkbox"/> | Ineligible | <input type="checkbox"/> |
| Notes:                                       | <div style="border: 1px solid black; height: 80px;"></div> |                          |            |                          |
| _____<br>2 <sup>nd</sup> Level Reviewer Name | _____<br>Signature   | _____<br>Date            |            |                          |

**Section I: Overseas Entitlement Division Review**

1<sup>st</sup> Level Review

|                                     |  |                                     |
|-------------------------------------|--|-------------------------------------|
| Eligibility for LQA:                | Eligible <input type="checkbox"/>                          | Ineligible <input type="checkbox"/> |
| Notes:                              | <div style="border: 1px solid black; height: 80px;"></div> |                                     |
| 1 <sup>st</sup> Level Reviewer Name | Signature  | Date                                |

2<sup>nd</sup> Level Review

|                                     |  |                                     |
|-------------------------------------|--|-------------------------------------|
| Eligibility for LQA:                | Eligible <input type="checkbox"/>                          | Ineligible <input type="checkbox"/> |
| Notes:                              | <div style="border: 1px solid black; height: 80px;"></div> |                                     |
| 2 <sup>nd</sup> Level Reviewer Name | Signature  | Date                                |