



DEPARTMENT OF THE NAVY

NAVY RECRUITING DISTRICT OHIO  
P.O. BOX 3990  
COLUMBUS, OHIO 43218-3990

NAVCRUITDISTOHIOINST 1050.2B

011

7 MAY 2014

NAVCRUITDISTOHIO INSTRUCTION 1050.2B

From: Commanding Officer, Navy Recruiting District Ohio

Subj: LEAVE AND LIBERTY POLICY FOR COMMAND PERSONNEL

Ref: (a) COMNAVCRUITCOMINST 1050.2D  
(b) DoD Instruction 1327.06  
(c) MILPERSMAN Article 1050 (Leave and Liberty)  
(d) NAVCRUITDISTOHIOINST 1001.1G  
(e) COMNAVCRUITCOMINST 4350.1C  
(f) COMNAVCRUITCOMINST 12000.1

Encl: (1) Procedures for Routing NAVCOMPT FORM 3065 (Leave Request/Authorization)  
(2) NAVCOMPT FORM 3065 (Leave Request/Authorization)  
(3) Navy Recruiting District (NRD) Ohio Unscheduled Leave Request Procedures Memorandum

1. Purpose. To promulgate leave and liberty policy and procedures for military and civilian personnel assigned to Navy Recruiting District (NRD) Ohio.

2. Cancellation. NAVCRUITDISTOHIOINST 1050.2A.

3. Discussion. NRD Ohio military personnel shall follow the guidelines as set forth in references (a) through (d). Federal Employees shall follow reference (e), with the exceptions as set forth in this instruction. Contractors shall follow guidelines in reference (f).

4. Military Personnel

a. Regular Leave. If not on official travel orders, personnel traveling outside the Continental US, or more than 250 miles from their place of duty, shall be on leave.

(1) E-Leave is accessible to Sailors through the Electronic Service Record (ESR) Self-Service account on the Navy Standard Integrated Personnel System (NSIPS) website: <https://nsips.nmci.navy.mil>. **When NSIPS is down, follow the guidelines in enclosure (1) and use the electronic version of NAVCOMPT Form 3065, enclosure (2), to request leave.**

(2) Authorizing Officer. The Commanding Officer authorizes all convalescent leave and regular leave for XO, CMDCM, and CR. The XO authorizes leave for Department Heads and special circumstances. Department Heads may grant leave to personnel within their departments, or may delegate this authority to Division Officers.

(3) DoD Foreign Clearance Guide. The Department of Defense (DoD) Foreign Clearance Guide is available at: <https://www.fcg.pentagon.mil/> and details entrance requirements to foreign countries for DoD personnel. All personnel are required to verify and comply with any requirements stipulated for the country(ies) they will be staying in during their leave periods.

b. Convalescent Leave. Personnel requiring any elective surgery shall submit request chit for approval to the Commanding Officer. Once approved, member must request convalescent leave hard copy.

c. Authorized Liberty. The XO or the cognizant Department Heads may delegate authority to Division Officers or Leading Chief Petty Officers to regulate liberty. References (d) and (e) prescribe limitations in granting liberty.

d. Terminal Leave. As outlined in enclosure (1) of reference (d), terminal leave in conjunction with house hunting/job hunting TAD cannot exceed 100 days. A request for separation/retirement leave may be approved by the CO (regardless of the number of days), subject to the following considerations:

(1) Member has excess leave balance available.

(2) A contact relief has been identified prior to the start of leave. For critical billets, face-to-face turnover may be necessary.

(3) No administrative or disciplinary actions affecting the member are pending.

(4) The request chit is submitted with sufficient advance notice (30 days minimum) prior to the start of terminal leave.

(5) The chain of command concurs that the member's absence will not adversely affect mission accomplishment.

**NOTE:** The accumulation of accrued leave for the sole purpose of taking an extended terminal leave period at the end of active service is discouraged. When manning and face-to-face turnover with incoming reliefs allow, terminal leave is generally approved.

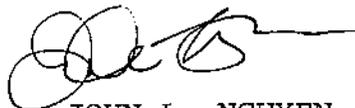
5. Civilian Personnel (Federal Employees)

a. Annual Leave. Per reference (e), leave request shall be requested as far in advance as possible, but not later than 3 days prior to leave start date. All requests shall be submitted via the Standard Labor Data Collection and Distribution Application (SLDCADA) and routed for approval.

b. Sick Leave. A period of illness that extends beyond 3 days must be supported by a physician's certificate. This certification must be presented **within 7 days of return** to duty and shall be submitted to your supervisor for signature.

c. Unscheduled Leave. In accordance with reference (e), employees are required to contact their immediate supervisor **not later than 30 minutes after their approved start time to inform them they will be late for work**, are ill, or have an unexpected emergency situation and will not be at their assigned work station for that absence. If unable to contact the supervisor (email, voicemail, or leaving messages by other means is not an acceptable alternative to making contact), employees shall contact the Command Duty Officer. Upon return to work, they will enter their time in SLDCADA. All Civilian GS personnel will have a signed copy of enclosure (3) on file with their immediate supervisor.

6. Civilian Personnel (Contract Employees): Time off for contract personnel shall be administered and documented in accordance with reference (f).

  
JOHN L. NGUYEN

Distribution:  
Electronic only, via  
<http://www.cnrc.navy.mil/ohio/ohio-latest-info.htm>

**PROCEDURES FOR ROUTING NAVCOMPT FORM 3065 (LEAVE  
REQUEST/AUTHORIZATION) WHEN NSIPS IS DOWN**

1. Military personnel shall request regular leave via the chain of command using the Leave Request/Authorization form. Go to Web Search in Internet Explorer and type in NAVCOMPT FORM 3065, then click on Leave Request Form/Authorization - Navy, click and open the document. When the box comes up click on open and the form comes up, then in the yellow security warning line click on enable content. You can save it to your Desktop and fill out your leave request. Requests shall be electronically routed via the member's chain of command and submitted to the NRD Command Leave Administrator (CLA) prior to departure on leave.

2. Leave for the Executive Officer, Command Master Chief, Chief Recruiter shall be approved by the Commanding Officer. The Executive Officer approves leave for Department Heads. Department Heads will approve leave requests for other personnel in their respective departments.

a. During regular working hours, call the CLA at (614)693-3012 or toll free 1-866-628-7327 to check out/in from leave. Collect calls will not be accepted for this purpose. During non-working hours, personnel will check in/out with the Command Duty Officer (CDO) at (614)565-3101. Be prepared to submit the following information: name, present location, whether checking-in or out on leave, date and time.

b. The member will print a hard copy and enter the time and date of departure on leave in blocks 27a and 27b on Part 1 of the leave authorization, and in block 27c will put the name of the person he/she spoke to or left a voice message IMMEDIATELY after placing the call.

(1) The CLA shall, upon commencement of leave, fill in blocks 27a, 27b, 27c and forward to the Command Pass Coordinator (CPC) for completion of blocks 30-33 of the leave request and forward to Personnel Support Detachment (PSD) Great Lakes via the Transaction Online Processing System (TOPS). Any extensions or modifications to the member's leave after commencement will be sent to PSD for processing.

(2) The member will enter the time and date of return from leave in blocks 28a and 28b on Part 1 of the leave authorization, and in block 28c will put the name of the person he/she spoke to or left a voice message with the CLA IMMEDIATELY after placing the telephone call.

(3) Upon completion of leave, the CLA shall fill in blocks 28a, 28b, and 28c of the member's leave request and file it in the command leave folder.

d. Request for extensions of leave may be approved by the Department Head. The CDO may approve a one day extension in the event the member is unable to contact their Department Head. The Department Head or CDO will notify the CLA of all approved leave extensions. The member will fill in blocks 29a, 29b, and in 29c put the official who authorized the extension on his/her copy.

**3. Each member must be in the immediate vicinity of the duty station (residence from which member commutes daily to and from work) upon commencement and termination of leave.** Permission to check-out and check-in by telephone is authorized as a personal convenience to the member and shall NOT be used as a means of extending the period of absence chargeable as leave.

4. If the member does not inform the CLA that he/she did not commence leave on the requested date, they will be charged the requested leave dates per reference (c).

5. For corrections to charged leave, a memo of explanation must be submitted by the member to the Admin Officer via his/her chain of command with their signatures to correct erroneous leave charged to the member's leave account.

7 MAY 2014

**LEAVE REQUEST/AUTHORIZATION**  
**NAVCOMPT FORM 3065 (3PT) (REV. 2-83)**

INSTRUCTIONS FOR COMPLETING THIS FORM  
 ARE ON THE REVERSE OF PART 3.

SEE REVERSE FOR  
 PRIVACY ACT  
 STATEMENT

1. DATE OF REQUEST		2. FOR ADMIN. USE ONLY APPROVAL OF THIS LEAVE IS NOT VALID WITHOUT CONTROL NO.		<b>LEAVE CONTROL NO.</b> →	
3. SSN		4. NAME (Last, First, MI)			5. PAY GRADE
6. SHIP/STATION		7. DEPT/DIV	8. DUTY SECTION	9. DUTY PHONE	
10. TYPE LEAVE  <input type="checkbox"/> REGULAR <input type="checkbox"/> SICK <input type="checkbox"/> EMERGENCY  <input type="checkbox"/> SEPARATION <input type="checkbox"/> RETIREMENT <input type="checkbox"/> OTHER _____			<b>FOR USE OUTUS ONLY</b>		12. MODE OF TRAVEL
			11a. Leaving Area of PERMDUSTA <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> AIR	<input type="checkbox"/> BUS
			11b. Taking Leave INCONUS <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> CAR	<input type="checkbox"/> TRAIN
13. DAYS REQUESTED	14. FROM (Hour, Date) (YYMMDD)		15. TO (Hour, Date) (YYMMDD)		16. NORMAL WORKING HOURS DAY OF DEPARTURE: FROM:                      TO:  DAY OF RETURN: FROM:                      TO:
17. LEAVE BALANCE DAYS AS OF	18. LEAVE USED THIS FY	19. LEAVE PHONE (      ) -			21. RATION STATUS (Enlisted) <input type="checkbox"/> COMMUTED RATIONS (COMRATS) <input type="checkbox"/> Meal Pass No. _____ Entitled to EDF meals except during periods of leave
20. LEAVE ADDRESS					

I CERTIFY THAT I HAVE SUFFICIENT FUNDS TO COVER THE COST OF ROUND TRIP TRAVEL. I UNDERSTAND THAT SHOULD ANY PORTION OF THIS LEAVE, IF APPROVED, RESULT IN MY TAKING MORE LEAVE THAN I CAN EARN ON MY CURRENT UN-EXTENDED ENLISTMENT OR CURRENT ACTIVE DUTY OBLIGATION, MY PAY WILL BE CHECKED FOR SUCH EXCESS LEAVE.

RECOMMENDED				DATE
<input type="checkbox"/> YES	<input type="checkbox"/> NO			
<input type="checkbox"/> YES	<input type="checkbox"/> NO			
<input type="checkbox"/> YES	<input type="checkbox"/> NO			
<input type="checkbox"/> YES	<input type="checkbox"/> NO			
23. APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>			

24. COMMENTS/REMARKS

25. SHIP OR STATION (Including telegraphic address)      26. REPORT ON EXPIRATION OF LEAVE TO (if other than block 25)

<b>DEPARTED ON LEAVE</b>		<b>RETURNED FROM LEAVE</b>		<b>GRANTED EXTENSION OF LEAVE ENDING</b>	
27a. HOUR	27b. DATE (*YYMMDD)	28a. HOUR	28b. DATE (*YYMMDD)	29a. HOUR	29b. DATE (*YYMMDD)
27c. OOD'S SIGNATURE		28c. OOD'S SIGNATURE		29c. OOD'S SIGNATURE	

IN CONSIDERATION OF THE MEMBER'S COMPLETION OF A FULL WORKDAY (AS DEFINED IN MILPERSMAN, NAVPERS 15560) ON THE DAYS OF DEPARTURE AND RETURN, THE INCLUSIVE DAYS SHOWN ARE CORRECT AND PROPER FOR CHARGING AS LEAVE.			30. INCLUSIVE LEAVE PERIOD TO BE CHARGED →	FIRST: (YY) (MM) (DD)	LAST: (YY) (MM) (DD)	31. NO. OF DAYS
---	--	--	--	-----------------------	----------------------	-----------------

I CERTIFY THAT THE ABOVE IS CORRECT AND PROPER TO THE BEST OF MY KNOWLEDGE.      32. CERTIFYING OFFICER'S TYPED NAME/RANK/TITLE      33. CERTIFYING OFFICER'S SIGNATURE

**FORWARD THIS COPY TO PERSONNEL OFFICE VIA COMMAND ONLY ON COMPLETION OF LEAVE.**

Date:

MEMORANDUM

From: Name and Title of Immediate Supervisor  
To: All NRD Ohio Civilian Employees

Subj: NAVY RECRUITING DISTRICT (NRD) OHIO UNSCHEDULED LEAVE  
REQUEST PROCEDURES

Ref: (a) COMNAVCRUITCOMINST 12000.1  
(b) NAVCRUITDISTOHIOINST 1050.2B

1. Per references (a), (b), and NRD Ohio policy, all leave (annual, sick, court, etc.) must be requested and approved as far in advance as possible. However, it is understood that events occur that may result in an employee needing to request leave that has not been pre-approved (i.e., emergencies, sickness, etc.). The following provides NRD Ohio's policy on requesting leave that has not yet been pre-approved:

a. Employee is required to contact and speak to their immediate supervisor **within half an hour of your scheduled starting time** indicating type of leave requested, expected duration, and reason for being absent. In the event you are unable to contact your immediate supervisor, you will then notify the CDO; however, it is your responsibility to call back until you are able to speak to your supervisor and obtain verbal approval to take the leave being requested. Leaving a voice mail or speaking with a co-worker does not constitute leave approval.

b. All requests shall be submitted to your immediate supervisor and the appropriate information will be entered into the Standard Labor Data Collection and Distribution Application (SLDCADA) for approval.

2. If the absence extends beyond the original reported duration, you must again contact and speak to your immediate supervisor (within prescribed timeframe above) and provide an acceptable reason for continuing the absence. Verbal approvals must be subsequently entered into SLDCADA. Approval of leave is at the immediate supervisor's discretion, depending upon workload.

Enclosure (3)

NAVCRUITDISTOHIOINST 1050.2B  
7 MAY 2014

3. If approval to take leave has not been obtained as prescribed above, the employee will be marked as Absent Without Leave (AWOL) and be subject to disciplinary action.

---

SIGNATURE OF ISSUING OFFICIAL

Receipt acknowledged (signature is for purpose of acknowledging a copy of this memorandum has been received by the employee).

---

EMPLOYEE SIGNATURE