



Senior Service America, Inc.
Senior Environmental Employment (SEE) Program
 8403 Colesville Road, Suite 200 • Silver Spring, Maryland 20910
 Phone: (301) 578-8900 • Fax: (301) 578-8895



SEE ENROLLMENT AGREEMENT - APPENDICES

(Appendices B, C and D)

Enrollment Agreement – Appendix B: SEE ENROLLEE RESTRICTIONS – EPA Guidelines Memorandum 93-001

Per EPA Guidelines Memorandum 93-001, SEE Enrollees cannot:

- Conduct Agency criminal investigations;
- Control Agency prosecutions or perform Agency adjudicatory functions (other than arbitration or other methods of alternative resolution that did not bind the Agency to action or inaction);
- Determine Agency policy;
- Determine Agency program priorities or budget requests;
- Collect, control or dispense Agency fees, royalties, duties or public funds (except for routine voucher/invoice examination, where amount to be collected is easily calculated, predetermined or readily controlled through standard cash management techniques);
- Determine the content of regulations or how they will be applied to particular cases;
- Issue or sign Agency orders;
- Sign Federal employee’s timecards;
- Drive government vehicles or government-rented vehicles;
- Sign Agency correspondence that commits the Agency to actions or commits the Agency funds;
- Negotiate for the Agency;
- Select or non-select individuals for Agency employment;
- Approve position descriptions and performance standards for agency employees;
- Direct, control or supervise government employees or contract employees;
- Determine Agency budget policy, guidance and strategy;
- Control Agency accounts or administer Agency trust funds;
- Sign financial documents as the funds certifying official (i.e. training, purchase orders, commitment notices, miscellaneous obligating documents);
- Determine what Agency property is to be disposed of and on what terms;
- Handle Confidential Business Information (CBI) related to the Toxic Substances Control Act (TSCA);
- Handle CBI under other EPA statutes except where specifically authorized by Agency regulations (questions on access to CBI under other EPA statutes should be addressed to Alan D. Margolis of the Office of General Counsel, 202-564-5438);
- Handle CBI materials related to Contractors (unless prior approval letters are on file from the Contractor);
- Use EPA Wellness Centers;
- Use EPA Health Centers except in cases of emergency;
- Approve Agency responses to Freedom of Information Act (FOIA) requests except for routine responses that, because of statute, regulations or Agency policy, do not require the exercise of judgment in determining whether documents are to be released or withheld;
- Approve Agency licensing actions and inspections;
- Regulate industry;
- Select program priorities;
- Exercise Agency discretion in applying government authority or make value judgments for Agency officials;
- Conduct administrative hearings or review finding concerning the eligibility of EPA employees for security clearances or actions affecting matters of personal reputation or eligibility to participate in EPA programs;
- Determine which supplies or services are to be acquired or which assistance awards of Inter-Agency Agreements/Grants (IAGs) are to be made;
- Serve as a voting, non-voting or technical advisory member of sources selection/sources evaluation boards for contracts or competitive assistance agreements;
- Approve, award, administer or terminate contracts, assistance agreements or IAGs;
- Determine whether costs incurred are eligible, necessary, reasonable, allocable and allowable for contracts, assistance agreements or IAGs;
- Receive cash awards via the Agency award/performance program.

Enrollee name (printed or typed): _____

Enrollee signature: _____

Date: _____



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Enrollment Agreement – Appendix C: CONFIDENTIALITY AGREEMENT – EPA Confidential Business Information (CBI)

I understand that I may have access to certain Confidential Business Information (CBI) submitted under the Clean Air Act (42 U.S.C. 7401 et seq.), the Federal Water Pollution Control Act (33 U.S.C. 1251 et seq.), the Safe Drinking Water Act (42 U.S.C. 300f et seq.), the Federal Insecticide, Fungicide and Rodenticide Act (7 U.S.C. 136 et seq.), the Federal Food, Drug and Cosmetic Act (21 U.S.C. 301 et seq.), the Resource Conservation and Recovery Act (42 U.S.C. 6901 et seq.), the Comprehensive Environmental Response, Compensation and Liability Act (42 U.S.C. 9601 et seq.), or other authorities.

I understand that the CBI may be used only in connection with my duties assisting the Environmental Protection Agency (EPA) under the Senior Environmental Employment Program, and may not be discussed without prior written approval of each affected business or of an EPA legal office. I agree that I will treat as confidential any CBI furnished to me, and I will follow both EPA confidentiality regulations and any security procedures required by EPA. I further agree that I will return all CBI to the EPA upon request of the Agency, whenever the information is no longer required for performance of the work required under the CBI grant or cooperative agreement, or upon termination of my duties under the grant or cooperative agreement.

I understand that under Section 10 (f) of the Federal Insecticide, Fungicide and Rodenticide Act (7 U.S.C. 136h (f), section 308 (b) of the Federal Water Pollution Control Act (33 U.S.C. 1318 (b), Section 3007 (b) and 9005 (b) of the Resource Conservation and Recovery Act (42 U.S.C. 6927 (b) and 6991 (b), and Section 104 (e) of the Comprehensive Environmental Response, Compensation and Liability Act (42 U.S.C. 9604 (e), I may be liable for a possible fine of up to \$10,000 and/or imprisonment for up to one year if I willfully disclose CBI to any person not authorized to receive it.

I understand that during the course of my work as a participant under the Senior Environmental Employment (SEE) Program at the Environmental Protection Agency (“EPA” or “Agency”), I may be given access to documents or information that may be protected by the attorney-client privilege, the attorney work-product privilege, or the deliberative process privilege; to documents or information that may be considered enforcement-sensitive or enforcement-confidential; to documents or information that may be protected by the Privacy Act of 1974, as amended; or to documents or information that may relate to the personal privacy of individuals.

I understand that such documents or information may be used only in connection with my duties as a SEE Enrollee, and that I may not otherwise copy, disclose or release in any manner such documents or information. I further agree that I will return all such documents or information to the EPA, whenever such documents or information are no longer required for the performance of my work assignments or upon termination of my duties as a SEE Enrollee.

Enrollee name (printed or typed): _____

Enrollee signature: _____

Date: _____



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Enrollment Agreement – Appendix D: CONFLICT OF INTEREST STATEMENT – EPA Guidelines Memorandum 91-001

In accordance with 40 CFR 30.613, EPA’s policy is to prevent personal organizational conflict of interest, or the appearance of such conflict of interest in the award and administration of the EPA assistance known as SEE Cooperative Agreement, as a SEE Enrollee:

I must not participate in any activity relating to EPA assistance if, to my knowledge, any of the following persons or organizations has a financial interest in the activity:

- Myself, my spouse, my child or my general partner,
- An organization (other than a public agency) in which I am serving as an official or employee, or
- Any person or organization with which I have any arrangements concerning prospective employment.

And I must avoid any action that might result in or create the appearance of:

- Using official position for private gain;
- Giving preferential treatment to any organization or person;
- Losing independence or impartiality;
- Making an official decision outside official channels; or
- Undermining public confidence in the integrity of EPA programs.

Enrollee name *(printed or typed)*: _____

Enrollee signature: _____

Date: _____