

DOE/ORO CONTROL FORM - DOE FINAL DIRECTIVE

PART A (To be completed by the **DIRECTIVES MANAGEMENT GROUP, AD-440**):

TO: **DIRECTOR, DIVISION OF PRIMARY INTEREST:** R. H. Smith, Diversity Programs and Employee Concerns Manager, M-5

NUMBER, TITLE, AND DATE OF DIRECTIVE: DOE O 311.1B, EQUAL EMPLOYMENT OPPORTUNITY AND DIVERSITY PROGRAM, of 02/12/2003

The attached directive, which is within your area of functional responsibility, is forwarded for review and necessary action. Complete Part B and forward this form to AD-440 by 03/05/2003.

PART B (To be completed by the **DIVISION OF PRIMARY INTEREST (DPI)**):

1. **THIS DOCUMENT MAY AFFECT THE WORK PERFORMED BY THE FOLLOWING CONTRACTORS:**
(Check Appropriate Boxes)

No (all contractors)

Yes If yes, whom? Bechtel Jacobs Co. ORAU UT-Battelle

Other contractors (list by type)

Many ORO Contractors have approved S/RIDs or WSS sets that may affect applicability of contractor requirements from this directive. Applicability of contractor requirements must take into account the approved standards set for each particular contract.

2. **IMPLEMENTATION:** Does the directive contain special implementation requirements and/or dates?
 No Yes If yes, describe:

3. **SIGNIFICANT PROVISIONS :** Are there any significant changes or impact? No Yes If yes, describe.
This Order cancels DOE O 311.1A, EQUAL EMPLOYMENT OPPORTUNITY AND DIVERSITY PROGRAM, dated 12/30/1996.

4. **OAK RIDGE OPERATIONS OFFICE DIRECTIVE:** Is a new ORO Directive or revision required? Yes No
If yes, target date for submission of Draft ORO Directive to AD-440 is _____.

5. **IDENTIFY CONTACT POINT:** Rufus Smith 576-4988
Name Telephone

6. **APPROVED BY DIRECTOR:** Rufus Smith, M-5 02/24/2003 576-4988
Original Signed By
Signature Date Telephone

7. *DOE Directives are available on the Internet at <http://www.directives.doe.gov/>. Directives will no longer be mailed in printed copy unless you do not have Internet capabilities.*

PART C (To be completed by the **DIRECTIVES MANAGEMENT GROUP (DMG)**):

APPROVED FOR DISTRIBUTION IN ACCORDANCE WITH OFFICIAL DIRECTIVE DISTRIBUTION LIST:

Jennifer G. Hamilton, AD-440 02/24/2003
Original Signed By
Name Date

INSTRUCTIONS TO ADDRESSEES: **THIS FORM IS TO BE FILED WITH THE DIRECTIVE AND RETAINED.**
(Revised 01/10/2003)

NNSA/YSO DIRECTIVES CONTROL FORM – FINAL DIRECTIVE

PART A (To be completed by the ORO DIRECTIVES MANAGEMENT GROUP, AD-440):

DIRECTIVE NUMBER, TITLE, AND DATE:

DOE O 311.1B, EQUAL EMPLOYMENT OPPORTUNITY AND DIVERSITY PROGRAM, of 02/12/2003

PURPOSE OF TRANSMITTAL: _____ New Directive Revised Directive

DOES THIS DIRECTIVE **CANCEL/REPLACE OR EXTEND** ANY OTHER DIRECTIVES? Yes _____ No

If "Yes," list what action (cancel/replace or extend) and list the directive(s), including the number(s), title(s), and date(s):

This Order cancels DOE O 311.1A, EQUAL EMPLOYMENT OPPORTUNITY AND DIVERSITY PROGRAM, of 12/30/1996.

The attached directive is forwarded for review and action. Complete Part B and forward this form to ORO DMG, AD-440, by **03/06/2003**.

PART B (To be completed by the NNSA Y-12 SITE OFFICE, Y12-01):

CONTRACTOR APPLICABILITY:

Does this directive affect the work performed by BWXT Y-12, L.L.C.? _____ Yes No

Does this directive affect the work performed by BWXT Y-12, L.L.C., subcontractors? _____ Yes No

If "Yes," list the subcontractors:

Many contractors have approved S/RIDs or WSS sets that may affect applicability of contractor requirements from this directive. Applicability of contractor requirements must take into account the approved standards set for each particular contract.

SIGNIFICANT PROVISIONS: Are there any significant changes or impact? _____ Yes No

List summary of directive changes and, if "Yes" above, describe the significant changes or impact:

IMPLEMENTATION: Does the directive contain special implementation requirements and/or dates? _____ Yes No

If "Yes," describe:

FOR DOE DIRECTIVE – SUPPLEMENTAL DIRECTIVE REQUIRED?

Is a new or revised supplemental directive required? _____ Yes No

If "Yes," target date for submission of draft supplemental directive is _____.

IDENTIFY CONTACT POINT: James R. Martin 576-0868
Name Telephone

APPROVED BY COR FOR DIRECTIVES: Diane McCarten, COR for Dir. 03/31/2003 576-9330
Signature Date Telephone

PART C (To be completed by the ORO DIRECTIVES MANAGEMENT GROUP, AD-440):

*DOE Directives are available on the DOE Directives, Regulations, Policies, and Standards Portal at <http://www.directives.doe.gov/>.
ORO Directives are available on the ORO Directives Management Group Home Page at http://www.ornl.gov/doe_oro_dmg/oro_dir.htm.
Directives will no longer be mailed in printed copy unless you do not have Internet capabilities.*

APPROVED FOR DISTRIBUTION IN ACCORDANCE WITH OFFICIAL DIRECTIVE DISTRIBUTION LIST:

Wayne H. Albaugh, AD-440 04/03/2003
Original Signed By Name Date

INSTRUCTIONS TO ADDRESSEES: THIS FORM IS TO BE FILED WITH THE DIRECTIVE AND RETAINED.

(Revised 01/10/2003)