United States Postal Service
Structured On-the-Job Training (SOJT) Certification

	Date SOJT Completed
Lead Retail Associate Name *(Your initials certify only that you were assigned the lesson plan and that the results were communicated to you.)*	Assignment Office
Coach Name *(Your initials certify that the retail associate named has completed 80% of that lesson plan successfully.*	SOJT Office

Structured On-the-Job Lesson Plan/	Steps in Lesson Plans (a)	# Steps Completed Successfully (b)	% Steps Completed Successfully (a/b)	Retail Coach Initials	Retail Associate Initials
Mandatory Core Proceses					
1. Establish a Stamp Credit or Cash Credit (POS)	9				
2. Conduct a Stamp Credit Audit or Cash Credit (POS)	10				
3. Conduct Unit Cash Reserve Audit	7				
4. Conduct Retail Associate Cash Portion/Retained Audit	8				
5. Order Stock from the SDO/SDN	4				
6. Receive Stock from the SDO/SDN	8				
7. Return Stock to the SDO/SDN	7				
8. Fill Retail Associate Stock Requisitions	6				
9. Process Retail Associate Stock Returns	4				
10. Conduct Unit Close Out Procedures	8				
11. Manage Trust and Suspense Accounts	6				
12. Process Inquiry for Money Orders	6				
13. Order Retail Merchandise for Unit	5				
14. Accept Supply Orders for Unit	4				
15. Accept Liberty Cash or Phone Cards from SDO/SDN	3				
16. Complete a Weekly Retail Schedule	5				
17. Order Supplies for Unit	5				
Specific Processes Applicable to Unit					
18. Process Claims for Loss	4				
19. Process Collect on Delivery (COD)	4				
20. Process Unnumbered Insurance Claims	6				
21. Perform a Postal Store Audit	8				
22. Process Business Reply Mail	8				
23. Process Postage Due Mail	8				
24. Process Passport Applications	9				
25. Process Annual Fees for Business Reply and Bulk Mailing	7				
26. Process International Inquiry Report	6				
27. Process Numbered Insurance Claim	5				
28. Update New IRT Versions	4				
29. Conduct a Self Service Audit	10				

Reserved

I certify that the lead sales and service associate has successfully completed the lesson plans checked on this form. The lead sales and service associate performance has been observed and rated. The results of this evaluation have been communicated to the lead sales and services associate.	Manager Certification *(Signature)*	Date *(MM/DD/YY)*