The Operation IMPACT (OI) program is designed to help service-connected injured veterans transition from military service into the workforce by identifying potential job opportunities and assisting with workplace accommodations. The program includes active recruiting of these veterans and affirmative efforts of job placement.

Here is what we expect program participants to agree to as part of participation in the OI program:

* You suffer from wounds, injuries or illnesses that were incurred **while serving in the military** following the events of September 11, 2001;
* You are transitioning from active military service or are considered a newly separated veteran who has been discharged or released from active duty within 3 years or be continuously enrolled in a degree or certificate program up to 5 years after separation of service, and;
* You received, or expect to receive, a service-connected physical disability rating of 30% or greater from the Department of Defense (DOD) or Department of Veterans Affairs (VA),
* Should you accept an offer of employment, you will be required to meet with the Northrop Grumman medical department, nurse case managers, workplace accommodations team, and/or Employee Assistance Program (EAP) representative to discuss your specific disability in order to identify potential workplace accommodations.

To assist with integration into the civilian workplace, Northrop Grumman may:

* Provide training to your hiring team regarding supporting transitioning veterans and people with disabilities
* Identify internal resources to serve as your sponsor to assist with your transition

Your participation in this program is voluntary, and if you prefer, you may apply to the Company for opportunities through the Careers website without this transition assistance.

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I acknowledge that I agree with the terms of the Operation IMPACT Guidelines as a condition of my participation in the program.

**ELECTRONIC SIGNATURE STATEMENT**: I certify that by entering my name, either hard copy signature or electronically typed, I agree to these guidelines as a condition of participating in the Operation IMPACT Program. I also intend for this document, if utilized in electronic form, to have the same force and effect as if it was personally signed by me in writing.

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| **Signature/Printed Name:** |  | **Date** |
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