****PARTICIPANT AGREEMENT****

**The Operation IMPACT (Injured Military Pursuing Assisted Career Transition)** is a diversity program within Northrop Grumman focused upon assisting service-connected injured service members as they transition from the military to a civilian career. Participation in this program is voluntary. The Operation IMPACT (OI) team is available to assist you in your transition however, it is imperative that you actively participate in the process. The following details expectations for an Operation IMPACT candidate.

1. The OI team will advise you on ways to improve your chances of attaining employment within Northrop Grumman Corporation and/or one of our Network of Champions partners. During this process, you may be required to:
	* Update your resume using the template provided.
	* Tailor your resume to the specific positions for which you are applying.
	* Practice your interviewing skills.
2. You are expected to check the Northrop Grumman Careers website regularly and identify positions that you are qualified for and are of interest to you.
3. To remain as an OI candidate, you will be required to apply for a minimum of one position every 6 months.
4. You are expected to respond to requests from the talent acquisition staff or hiring managers to arrange an interview and/or complete prescreening questionnaires.
5. It is imperative that you maintain contact with the OI team and notify us if you secure employment outside of NG.
6. You are required to keep your contact information updated with the program office.

Failure to comply with recommendations provided by the OI team can result in your participation in the OI program being discontinued.

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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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