

## Read The Following Instructions Carefully Before You Complete This Application

- **DO NOT SUBMIT A RESUME INSTEAD OF THIS APPLICATION.**
- **TYPE OR PRINT CLEARLY IN DARK INK.**
- **IF YOU NEED MORE SPACE** for an answer, use a sheet of paper the same size as this page. On each sheet write your name, Social Security Number, the announcement number or job title, and the item number. Attach all additional forms and sheets to this application at the top of page 3.
- If you do not answer all questions fully and correctly, you may delay the review of your application and lose job opportunities.
- Unless you are asked for additional material in the announcement or qualification information, **do not attach** any materials, such as: official position descriptions, performance evaluations, letters of recommendation, certificates of training, publications, etc. Any materials you attach which were not asked for may be removed from your application and will not be returned to you.
- We suggest that you keep a copy of this application for your use. If you plan to make copies of your application, we suggest you leave items 1, 48 and 49 blank. Complete these blank items each time you apply. **YOU MUST SIGN AND DATE, IN INK, EACH COPY YOU SUBMIT.**
- To apply for a specific Federal civil service examination (whether or not a written test is required) or a specific vacancy in an Federal agency:
  - Read the announcement and other materials provided.
  - Make sure that your work experience and/or education meet the qualification requirements described.
  - Make sure the announcement is open for the job and location you are interested in. Announcements may be closed to receipt of applications for some types of jobs, grades, or geographic locations.
  - Make sure that you are allowed to apply. Some jobs are limited to veterans, or to people who work for the Federal Government or have worked for the Federal Government in the past.
  - Follow any directions on "How to Apply". If a written test is required, bring any material you are instructed to bring to the test session. For example, you may be instructed to "Bring a completed SF 171 to the test." If a written test is not required, mail this application and all other forms required by the announcement to the address specified in the announcement.

## Work Experience (Item 24)

- Carefully complete each experience block you need to describe your work experience. Unless you qualify based on education alone, your rating will depend on your description of previous jobs. Do not leave out any jobs you held during the last ten years.
- Under Description of Work, write a clear and brief, but complete description of your major duties and responsibilities for each job. Include any supervisory duties, special assignments, and your accomplishments in the job. We may verify your description with your former employers.
- If you had a major change of duties or responsibilities while you worked for the same employer, describe each major change as a separate job.

## Privacy Act and Public Burden Statements

The Office of Personnel Management is authorized to rate applicants for Federal jobs under sections 1302, 3301, and 3304 of title 5 of the U.S. Code. Section 1104 of title 5 allows the Office of Personnel Management to authorize other Federal agencies to rate applicants for Federal jobs. We need the information you put on this form and associated application forms to see how well your education and work skills qualify you for a Federal job. We also need information on matters such as citizenship and military service to see whether you are affected by laws we must follow in deciding who may be employed by the Federal Government.

We must have your Social Security Number (SSN) to keep your records straight because other people may have the same name and birth date. The SSN has been used to keep records since 1943, when Executive Order 9397 asked agencies to do so. The Office of Personnel Management may also use your SSN to make requests for information about you from employers, schools, banks, and others who know you, but only as allowed by law or Presidential directive. The information we collect by using your SSN will be used for employment purposes and also may be used for studies, statistics, and computer matching to benefit and payment files.

## Veteran Preference in Hiring (Item 22)

- **DO NOT LEAVE Item 22 BLANK.** If you do not claim veteran preference, place an "X" in the box next to "NO PREFERENCE".
- You cannot receive veteran preference if you are retired or plan to retire at or above the rank of major or lieutenant commander, unless you are disabled or retired from the active military Reserve.
- To receive veteran preference your separation from active duty must have been under honorable conditions. This includes honorable and general discharges. A clemency discharge does not meet the requirements of the Veteran Preference Act.
- Active duty for training in the military Reserve and National Guard programs is not considered active duty for purposes of veteran preference.
- To qualify for preference you must meet ONE of the following conditions:
  1. Served on active duty anytime between December 7, 1941, and July 1, 1955; (If you were a Reservist called to active duty between February 1, 1955 and July 1, 1955, you must meet condition 2, below.)
    - or
  2. Served on active duty any part of which was between July 2, 1955 and October 14, 1976 or a Reservist called to active duty between February 1, 1955 and October 14, 1976 and who served for more than 180 days;
    - or
  3. Entered on active duty between October 15, 1976 and September 7, 1980 or a Reservist who entered on active duty between October 15, 1976 and October 13, 1982 and received a Campaign Badge or Expeditionary Medal or are a disabled veteran;
    - or
  4. Enlisted in the Armed Forces after September 7, 1980 or entered active duty other than by enlistment on or after October 14, 1982 and:
    - a. completed 24 months of continuous active duty or the full period called or ordered to active duty, or were discharged under 10 U.S.C. 1171 or for hardship under 10 U.S.C. 1173 and received or were entitled to receive a Campaign Badge or Expeditionary Medal; or
    - b. are a disabled veteran.
- If you meet one of the four conditions above, you qualify for 5-point preference. If you want to claim 5-point preference and do not meet the requirements for 10-point preference, discussed below, place an "X" in the box next to "5-POINT PREFERENCE".
- If you think you qualify for 10-Point Preference, review the requirements described in the Standard Form (SF) 15, Application for 10-Point Veteran Preference. The SF 15 is available from any Federal Job Information Center. The 10-point preference groups are:
  - Non-Compensably Disabled or Purple Heart Recipient.
  - Compensably Disabled (less than 30%).
  - Compensably Disabled (30% or more).
  - Spouse, Widow(er) or Mother of a deceased or disabled veteran.
- If you claim 10-point preference, place an "X" in the box next to the group that applies to you. To receive 10-point preference you must attach a completed SF 15 to this application together with the proof requested in the SF 15.

Information we have about you may also be given to Federal, State, and local agencies for checking on law violations or for other lawful purposes. We may send your name and address to State and local Government agencies, Congressional and other public offices, and public international organizations, if they request names of people to consider for employment. We may also notify your school placement office if you are selected for a Federal job.

Giving us your SSN or any of the other information is voluntary. However, we cannot process your application, which is the first step toward getting a job, if you do not give us the information we request. Incomplete addresses and ZIP Codes will also slow processing.

Public burden reporting for this collection of information is estimated to vary from 20 to 360 minutes with an average of 50 minutes per response, including time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden to Reports and Forms Management Officer, U.S. Office of Personnel Management, 1900 E Street, N.W., Room 6410, Washington, D.C. 20415; and to the Office of Management and Budget, Paperwork Reduction Project (3206-0012), Washington, D.C. 20503.

DETACH THIS PAGE—NOTE SF 171-A ON BACK

# Application for Federal Employment—SF 171

Read the instructions before you complete this application. Type or print clearly in dark ink.

Form Approved  
OMB No. 3206-0012

## GENERAL INFORMATION

**1** What kind of job are you applying for? Give title and announcement no. (if any)

**2** Social Security Number **3** Sex  
 Male  Female

**4** Birth date (Month, Day, Year) **5** Birthplace (City and State or Country)

**6** Name (Last, First, Middle)  
 Mailing address (include apartment number, if any)  
 City State ZIP Code

**7** Other names ever used (e.g., maiden name, nickname, etc.)

**8** Home Phone **9** Work Phone  
 Area Code Number Area Code Number Extension

**10** Were you ever employed as a civilian by the Federal Government? If "NO", go to item 11. If "YES", mark each type of job you held with an "X".  
 Temporary  Career-Conditional  Career  Excepted  
 What is your highest grade, classification series and job title?

Dates at highest grade: FROM TO

## AVAILABILITY

**11** When can you start work? (Month and Year) **12** What is the lowest pay you will accept? (You will not be considered for jobs which pay less than you indicate.)  
 Pay \$ \_\_\_\_\_ per \_\_\_\_\_ OR Grade \_\_\_\_\_

**13** In what geographic area(s) are you willing to work?

**14** Are you willing to work:

	YES	NO
A. 40 hours per week (full-time)?		
B. 25-32 hours per week (part-time)?		
C. 17-24 hours per week (part-time)?		
D. 16 or fewer hours per week (part-time)?		
E. An intermittent job (on-call/seasonal)?		
F. Weekends, shifts, or rotating shifts?		

**15** Are you willing to take a temporary job lasting:  
 A. 5 to 12 months (sometimes longer)?  
 B. 1 to 4 months?  
 C. Less than 1 month?

**16** Are you willing to travel away from home for:  
 A. 1 to 5 nights each month?  
 B. 6 to 10 nights each month?  
 C. 11 or more nights each month?

## MILITARY SERVICE AND VETERAN PREFERENCE

**17** Have you served in the United States Military Service? If your only active duty was training in the Reserves or National Guard, answer "NO". If "NO", go to item 22. YES NO

**18** Did you or will you retire at or above the rank of major or lieutenant commander? YES NO

## FOR USE OF EXAMINING OFFICE ONLY

Date entered register Form reviewed:  
Form approved:

Option	Grade	Earned Rating	Veteran Preference	Augmented Rating
			<input type="checkbox"/> No Preference Claimed	
			<input type="checkbox"/> 5 Points (Tentative)	
			<input type="checkbox"/> 10 Pts. (30% Or More Comp. Dis.)	
			<input type="checkbox"/> 10 Pts. (Less Than 30% Comp. Dis.)	
			<input type="checkbox"/> Other 10 Points	

Initials and Date  Disallowed  Being Investigated

## FOR USE OF APPOINTING OFFICE ONLY

Preference has been verified through proof that the separation was under honorable conditions, and other proof as required.

5-Point  10-Point - 30% or More Compensable Disability  10-Point - Less Than 30% Compensable Disability  10-Point - Other

Signature and Title Agency Date

## MILITARY SERVICE AND VETERAN PREFERENCE

**19** Were you discharged from the military service under honorable conditions? (If your discharge was changed to "honorable" or "general" by a Discharge Review Board, answer "YES". If you received a clemency discharge, answer "NO".) If "NO", provide below the date and type of discharge you received.

	YES	NO
Discharge Date (Month, Day, Year)		
Type of Discharge		

**20** List the dates (Month, Day, Year), and branch for all active duty military service.

From	To	Branch of Service

**21** If all your active military duty was after October 14, 1976, list the full names and dates of all campaign badges or expeditionary medals you received or were entitled to receive.

**22** Read the instructions that came with this form before completing this item. When you have determined your eligibility for veteran preference from the instructions, place an "X" in the box next to your veteran preference claim.

NO PREFERENCE  
 5-POINT PREFERENCE -- You must show proof when you are hired.  
 10-POINT PREFERENCE -- If you claim 10-point preference, place an "X" in the box below next to the basis for your claim. To receive 10-point preference you must also complete a Standard Form 15, Application for 10-Point Veteran Preference, which is available from any Federal Job Information Center. ATTACH THE COMPLETED SF 15 AND REQUESTED PROOF TO THIS APPLICATION.

Non-compensably disabled or Purple Heart recipient.  
 Compensably disabled, less than 30 percent.  
 Spouse, widow(er), or mother of a deceased or disabled veteran.  
 Compensably disabled, 30 percent or more.

THE FEDERAL GOVERNMENT IS AN EQUAL OPPORTUNITY EMPLOYER  
 PREVIOUS EDITION USABLE UNTIL 12-31-90

NSN 7540-00-935-7150

171-110

Standard Form 171 (Rev. 6-88)  
 U.S. Office of Personnel Management  
 FPM Chapter 295



**EDUCATION**

<p><b>25</b> Did you graduate from high school? <i>If you have a GED high school equivalency or will graduate within the next nine months, answer "YES".</i></p> <p> <input type="checkbox"/> YES <input type="checkbox"/> NO                                   If "YES", give month and year graduated or received GED equivalency: .....                                   If "NO", give the highest grade you completed: ..             </p>	<p><b>26</b> Write the name and location (<i>city and state</i>) of the last high school you attended or where you obtained your GED high school equivalency.</p>
<p><b>27</b> Have you ever attended college or graduate school?</p> <p> <input type="checkbox"/> YES <input type="checkbox"/> NO                                   If "YES", continue with 28.                                   If "NO", go to 31.             </p>	

**28** NAME AND LOCATION (*city, state and ZIP Code*) OF COLLEGE OR UNIVERSITY.. *If you expect to graduate within nine months, give the month and year you expect to receive your degree:*

Name	City	State	ZIP Code	MONTH AND YEAR ATTENDED		NUMBER OF CREDIT HOURS COMPLETED		TYPE OF DEGREE (e.g. B.A., M.A.)	MONTH AND YEAR OF DEGREE
				From	To	Semester	Quarter		
1)									
2)									
3)									

29 CHIEF UNDERGRADUATE SUBJECTS <i>Show major on the first line</i>	NUMBER OF CREDIT HOURS COMPLETED	30 CHIEF GRADUATE SUBJECTS <i>Show major on the first line</i>	NUMBER OF CREDIT HOURS COMPLETED
	Semester Quarter		Semester Quarter
1)		1)	
2)		2)	
3)		3)	

**31** If you have completed any **other courses or training related to the kind of jobs you are applying for** (*trade, vocational, Armed Forces, business*) give information below.

NAME AND LOCATION ( <i>city, state and ZIP Code</i> ) OF SCHOOL	MONTH AND YEAR ATTENDED		CLASS-ROOM HOURS	SUBJECT(S)	TRAINING COMPLETED	
	From	To			YES	NO
School Name 1)						
City State ZIP Code						
School Name 2)						
City State ZIP Code						

**SPECIAL SKILLS, ACCOMPLISHMENTS AND AWARDS**

**32** Give the title and year of any honors, awards or fellowships you have received. List your special qualifications, skills or accomplishments that may help you get a job. *Some examples are: skills with computers or other machines; most important publications (do not submit copies); public speaking and writing experience; membership in professional or scientific societies; patents or inventions; etc.*

<p><b>33</b> How many words per minute can you: TYPE? TAKE DICTATION?</p> <p><i>Agencies may test your skills before hiring you.</i></p>	<p><b>34</b> List <b>job-related</b> licenses or certificates that you have, such as: <i>registered nurse; lawyer; radio operator; driver's; pilot's; etc.</i></p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>LICENSE OR CERTIFICATE</th> <th>DATE OF LATEST LICENSE OR CERTIFICATE</th> <th>STATE OR OTHER LICENSING AGENCY</th> </tr> </thead> <tbody> <tr> <td>1)</td> <td></td> <td></td> </tr> <tr> <td>2)</td> <td></td> <td></td> </tr> </tbody> </table>	LICENSE OR CERTIFICATE	DATE OF LATEST LICENSE OR CERTIFICATE	STATE OR OTHER LICENSING AGENCY	1)			2)		
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1)										
2)										

**35** Do you speak or read a language other than English (*include sign language*)? *Applicants for jobs that require a language other than English may be given an interview conducted solely in that language.*

LANGUAGE(S)	CAN PREPARE AND GIVE LECTURES		CAN SPEAK AND UNDERSTAND		CAN TRANSLATE ARTICLES		CAN READ ARTICLES FOR OWN USE	
	Fluently	With Difficulty	Fluently	Passably	Into English	From English	Easily	With Difficulty
1)								
2)								

**REFERENCES**

**36** List three people who are not related to you and are not supervisors you listed under 24 who know your qualifications and fitness for the kind of job for which you are applying. *At least one should know you well on a personal basis.*

FULL NAME OF REFERENCE	TELEPHONE NUMBER(S) <i>(Include Area Code)</i>	PRESENT BUSINESS OR HOME ADDRESS <i>(Number, street and city)</i>	STATE	ZIP CODE
1)				
2)				
3)				

**BACKGROUND INFORMATION-- You must answer each question in this section before we can process your application.**

**37** Are you a citizen of the United States? (In most cases you must be a U.S. citizen to be hired. You will be required to submit proof of identity and citizenship at the time you are hired.) If "NO", give the country or countries you are a citizen of: \_\_\_\_\_

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

**NOTE: It is important that you give complete and truthful answers to questions 38 through 44.** If you answer "YES" to any of them, provide your explanation(s) in **Item 45.** Include convictions resulting from a plea of nolo contendere (*no contest*). **Omit:** 1) traffic fines of \$100.00 or less; 2) any violation of law committed before your 16th birthday; 3) any violation of law committed before your 18th birthday, if finally decided in juvenile court or under a Youth Offender law; 4) any conviction set aside under the Federal Youth Corrections Act or similar State law; 5) any conviction whose record was expunged under Federal or State law. We will consider the date, facts, and circumstances of each event you list. In most cases you can still be considered for Federal jobs. However, **if you fail to tell the truth or fail to list all relevant events or circumstances, this may be grounds for not hiring you, for firing you after you begin work, or for criminal prosecution (18 USC 1001).**

<b>38</b>	During the last 10 years, were you <b>fired from any job</b> for any reason, did you <b>quit after being told that you would be fired</b> , or did you leave by mutual agreement because of specific problems? .....	<b>YES</b>	<b>NO</b>
<b>39</b>	Have you <b>ever</b> been convicted of, or forfeited collateral for <b>any felony violation</b> ? (Generally, a felony is defined as any violation of law punishable by imprisonment of longer than one year, except for violations called misdemeanors under State law which are punishable by imprisonment of two years or less.) .....	<input type="checkbox"/>	<input type="checkbox"/>
<b>40</b>	Have you <b>ever</b> been convicted of, or forfeited collateral for <b>any firearms or explosives violation</b> ? .....	<input type="checkbox"/>	<input type="checkbox"/>
<b>41</b>	Are you <b>now</b> under charges for <b>any violation of law</b> ? .....	<input type="checkbox"/>	<input type="checkbox"/>
<b>42</b>	During the <b>last 10 years</b> have you forfeited collateral, been convicted, been imprisoned, been on probation, or been on parole? Do not include violations reported in 39, 40, or 41, above. ....	<input type="checkbox"/>	<input type="checkbox"/>
<b>43</b>	Have you <b>ever</b> been convicted by a military <b>court-martial</b> ? If no military service, answer "NO" .....	<input type="checkbox"/>	<input type="checkbox"/>
<b>44</b>	Are you <b>delinquent</b> on any Federal debt? (Include delinquencies arising from Federal taxes, loans, overpayment of benefits, and other debts to the U.S. Government <b>plus</b> defaults on Federally guaranteed or insured loans such as student and home mortgage loans.) .....	<input type="checkbox"/>	<input type="checkbox"/>

**45** If "YES" in: **38** - Explain for each job the **problem(s)** and your reason(s) for leaving. Give the employer's name and address.  
**39 through 43** - Explain each violation. Give place of occurrence and name/address of police or court involved.  
**44** - Explain the type, length and amount of the delinquency or default, and steps you are taking to correct errors or repay the debt. Give any identification number associated with the debt and the address of the Federal agency involved.

**NOTE:** If you need more space, use a sheet of paper, and include the item number.

Item No.	Date (Mo./Yr.)	Explanation	Mailing Address
			Name of Employer, Police, Court, or Federal Agency
			City State ZIP Code
			Name of Employer, Police, Court, or Federal Agency
			City State ZIP Code

**46** Do you receive, or have you ever applied for retirement pay, pension, or other pay based on military, Federal civilian, or District of Columbia Government service? .....

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

**47** Do any of your relatives work for the United States Government or the United States Armed Forces? Include: *father; mother; husband; wife; son; daughter; brother; sister; uncle; aunt; first cousin; nephew; niece; father-in-law; mother-in-law; son-in-law; daughter-in-law; brother-in-law; sister-in-law; stepfather; stepmother; stepson; stepdaughter; stepbrother; stepsister; half brother; and half sister.* .....

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

If "YES", provide details below. If you need more space, use a sheet of paper.

Name	Relationship	Department, Agency or Branch of Armed Forces

**SIGNATURE, CERTIFICATION, AND RELEASE OF INFORMATION**

**YOU MUST SIGN THIS APPLICATION. Read the following carefully before you sign.**

- A false statement on any part of your application may be grounds for not hiring you, or for firing you after you begin work. Also, you may be punished by fine or imprisonment (U.S. Code, title 18, section 1001).
- If you are a male born after December 31, 1959 you must be registered with the Selective Service System or have a valid exemption in order to be eligible for Federal employment. You will be required to certify as to your status at the time of appointment.
- **I understand** that any information I give may be investigated as allowed by law or Presidential order.
- **I consent** to the release of information about my ability and fitness for Federal employment by *employers, schools, law enforcement agencies and other individuals and organizations, to investigators, personnel staffing specialists, and other authorized employees of the Federal Government.*
- **I certify** that, to the best of my knowledge and belief, **all** of my statements are true, correct, complete, and made in good faith.

<b>48</b> SIGNATURE ( <i>Sign each application in dark ink</i> )	<b>49</b> DATE SIGNED ( <i>Month, day, year</i> )
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# Standard Form 171-A— Continuation Sheet for SF 171 (Back)

• Attach all SF 171-A's to your application at the top of page 3.

1. Name (Last, First, Middle Initial)	2. Social Security Number
3. Job Title or Announcement Number You Are Applying For	4. Date Completed

**ADDITIONAL WORK EXPERIENCE BLOCKS**

<input style="width: 20px; height: 15px;" type="checkbox"/> Name and address of employer's organization (include ZIP Code, if known)	Dates employed (give month, day and year) From: _____ To: _____	Average number of hours per week	Number of employees you supervised
Your immediate supervisor Name _____ Area Code _____ Telephone No. _____	Exact title of your job _____	Your reason for leaving _____ If Federal employment (civilian or military) list series, grade or rank, and, if promoted in this job, the date of your last promotion	
Salary or earnings Starting \$ _____ per _____ Ending \$ _____ per _____			

Description of work: Describe your specific duties, responsibilities and accomplishments in this job, including the job title(s) of any employees you supervised. If you describe more than one type of work (for example, carpentry and painting, or personnel and budget), write the approximate percentage of time you spent doing each.

For Agency Use (skill codes, etc.)

# Standard Form 171-A—Continuation Sheet for SF 171

Form Approved:  
OMB No. 3206-0012

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	From: _____ To: _____	Your reason for leaving	
	Salary or earnings		
Starting \$ _____ per	Ending \$ _____ per		

Your immediate supervisor Name	Area Code	Telephone No.	Exact title of your job	If Federal employment (civilian or military) list series, grade or rank, and, if promoted in this job, the date of your last promotion
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For Agency Use (skill codes, etc.)

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	Salary or earnings		
Starting \$ _____ per	Ending \$ _____ per		

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	From:	To:			
	Salary or earnings		Your reason for leaving		
	Starting \$	per			
Ending \$	per				
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For Agency Use (skill codes, etc.)