

Instructions for Completing Application for Employment

Carefully Read the Following Instructions and the Vacancy Announcement Before You Complete this Application

THIS APPLICATION IS REQUIRED FOR CERTAIN EMPLOYMENT OPPORTUNITIES IN THE DEPARTMENT OF STATE. TYPE OR PRINT CLEARLY IN BLACK INK. NOTE: Illegible statements on the application form may hinder full consideration of your application. Data on the application form are read by computer. Using care while filling in the form will speed processing of your application. **TYPING IS PREFERRED.** If you plan to type this application, **first fill in the boxes** (items #10, 11, 12, etc.) with black ink. If you plan to handwrite, print carefully and close letters.

Before completing this application, determine from the appropriate office if applications are being accepted for the position in which you have an interest and, if so, obtain a vacancy announcement from that office. In addition to describing the job, the announcement will help you determine if you have the appropriate qualifications and how to present them, advise whether any additional application documents are needed, and explain how to submit the application and any supplemental documents.

You must submit at least the following parts of this application (refer to the vacancy announcement for complete instructions on what to submit): one Page 3, one Page 4, one Page 5 and one page 6. On each Page 4, 5 and 6 you submit, enter your Social Security Number and up to the first 18 characters of your last name. You may submit more than one Page 4 depending on the number of experience blocks you need, but only one Page 5.

When completing date (except item # 18- "Date of Diploma/GED" and items #19 & 20 - "Date of Degree"), use the following format: 03-08-1994.

Answer all questions fully and correctly. Otherwise, you may delay the review of your application and exclude yourself from consideration for employment. See the vacancy announcement for the fax number and/or mailing instructions and for any required additional submissions and attachments. You must keep a copy of this application with an original signature. At some point in the selection process, you may be asked to submit original copies of your application and attachments. If you plan to make copies of your application, we suggest you leave items #9, 24 and 25 blank, so you can use this application for future vacancies. Complete these blank items each time you apply. **YOU MUST SIGN AND DATE, IN INK, EACH COPY YOU SUBMIT.**

SPECIFIC INSTRUCTIONS

Page 3

#5. If applicable, include your apartment number at the end of your street address.

#6, 7. Include area codes for all phone numbers. Use the following format: 202-555-1234.

#12. If you are a male and were born prior to December 31, 1959, you should NOT answer item # 12.

#13. **DO NOT LEAVE ITEM #13 BLANK.** If you do not claim veterans' preference, mark the "No Preference" box. You cannot receive veterans' 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 veterans' 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 Veterans' Preference Act. Active duty for training in the military Reserve and National Guard programs is not considered active duty for purposes of veterans' 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 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 previous four conditions, you qualify for 5-Point Preference. If you want to claim 5-Point Preference and do not meet the requirements for 10-Point Preference, mark the box next to "5-Point Preference."

Instructions for Completing Application for Employment (Con't)

(Item #13 continued)

If you think you qualify for "10-Point Preference", review the requirements described in Standard Form (SF) 15, Application for 10-Point Veterans' Preference. The SF-15 is available from any Federal Job Information Center. If you claim "10-Point Preference", mark the box next to "10-Point Preference." 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.

To receive "10-Point Preference", you must send in a completed SF-15 with the proof requested in the SF-15.

#16, 17. Mark only one box per item. For # 16, indicate the highest level of education you have completed. For # 17, mark the box that most closely indicates your present status.

#18, 19, 20. List the most recently attended schools for each of these items. On Page 5, you have more space to list schools where you received additional degrees or certificates, such as from Vocational/Technical programs. Use the following format for "Date of Diploma/GED" and "Date of Degree": mm-yyyy (e.g. 04-1994). For "Date From" and "Date To" use mm-yyyy (e.g. 04-2000).

#22. Rate your proficiency for speaking and reading languages other than English. Be sure to include the two languages in which you have the highest proficiencies. If you wish to list more than two languages in which you have proficiency, give details in the "Continued Items" area on Page 5. Rate your proficiency using the codes listed below:

Proficiency Code	Speaking Definitions	Reading Definitions
0-No Practical Proficiency	No practical speaking proficiency	No practical reading proficiency.
1-Elementary Proficiency	Able to satisfy routing travel needs and minimum courtesy requirements.	Able to read some personal and place names, street signs, office and shop designations, numbers and isolated words and phrases.
2-Limited Working Proficiency	Able to satisfy routine social demands and limited work requirements.	Able to read simple prose, in a form equivalent to typescript or printing, on subjects within a familiar context.
3-Minimum Professional Proficiency	Able speak the language with sufficient structural accuracy and vocabulary to participate effectively in most formal and informal conversations on practical, social, and professional topics.	Able to read standard newspaper items addressed to the general reader, routine correspondence, reports, and technical materials in the individual's special field.
4-Full Professional Proficiency	Able to use the language fluently and accurately on all levels pertinent to professional needs.	Able to read all styles and forms of the language pertinent to professional needs.
5-Native or Bilingual Proficiency	Equivalent to that of an educated native speaker.	Equivalent to that of an educated native.

Pages 4 & 5

Fill in your employment, unemployment, and education activities, **beginning with the present and working backwards 10 years**. Label each experience with a consecutive letter (A, B, C, D, etc.) beginning with the letter "A" in the first "Experience Block". **INCLUDE ALL:** full-time work, part-time work, temporary work, paid work, unpaid work, active military duty, self-employment, periods of unemployment, educational activities (for unpaid activities, leave the salary blocks blank). You may also include any other experience prior to the past 10 years which you feel would be relevant to the position for which you are applying. If you had a significant change of duties or responsibilities while you worked for the same employer, describe each major change as a separate experience. If specific experience continues to the present, mark the box for "Present" **and do not mark the "Date To" blocks.**

PRIVACY ACT STATEMENT

Section 1104 of Title 5 of the U.S. Code allows Federal agencies to rate applicants for Federal jobs. We need the information you put on this application form 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.

Executive Order 9397 authorizes solicitation of your Social Security Number (SSN) for use as an identifier in personnel records management, thus ensuring proper identification of applicants throughout the selection and employment process. 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 payment files. Furnishing your SSN or any of the other data specified in the vacancy announcement, is voluntary. However, failure to do so may prevent timely processing of your application or may prevent consideration for the vacancy.

Note: If you receive the application form by fax and the four corner boxes are cut off at the top or bottom of any page, please contact the sending office to resend the fax or request a form by mail. The form may not read properly if the boxes are not intact.



U.S. Department of State Application for Employment

*OMB Approved No. 1405-0139
Expires 05-31-2005
Estimated Burden 30 Minutes

<input type="checkbox"/> Mr. 1. Name (Last, First, MI)			
<input type="checkbox"/> Mrs.			
<input type="checkbox"/> Ms.			
2. Other Names Ever Used (maiden, nicknames, etc.)		3. Date of Birth (mm-dd-yyyy)	4. Social Security Number
5. Current Address (include apartment number, if any)			
5a. City	5b. State (2 Letters)	5c. ZIP/Postal Code (ZIP +4)	5d. E-Mail Address
5e. Country (if not United States)		6. Current Home Phone (include Area Code)	6a. Current Work Phone (include Area Code)
7. Permanent Address (include apartment number, if any)			
7a. Permanent City		7b. State (2 Letters)	7c. ZIP/Postal Code (ZIP +4)
7d. Permanent Country (if not United States)		7e. Permanent Home Phone (include Area Code)	
8. Indicate Title, Position or Program you are applying for.		Job Announcement Number	9. Lowest Acceptable Annual Salary Or Grade Level
10. Are you available for: (Select all appropriate)		11. Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Full-Time?	<input type="checkbox"/> Shift Work?	Is your spouse/cohabitant a U.S. Citizen?	
<input type="checkbox"/> Temporary/Part-Time?	<input type="checkbox"/> Flexible Work Schedule?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Overtime?	<input type="checkbox"/> World Wide Assignment?	If "NO", enter the country of his/her citizenship.	
		12. If you are a male born after December 31, 1959, have you registered with the Selective Service? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		13. Veteran's Preference <input type="checkbox"/> No Preference <input type="checkbox"/> 5-Point Preference <input type="checkbox"/> 10-Point Preference	
14. Were you ever employed as a civilian by the Federal Government? If "YES" mark all that apply.		15. Do you have a relative working for the Agency for which you are applying? If "YES", give details on Page 5.	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Temporary <input type="checkbox"/> Career-Conditional <input type="checkbox"/> Career <input type="checkbox"/> Excepted			
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? <input type="checkbox"/> Yes <input type="checkbox"/> No		16. Highest Education Level Completed	
		<input type="checkbox"/> 10 <input type="checkbox"/> College: 2 <input type="checkbox"/> Graduate Studies <input type="checkbox"/> 11 <input type="checkbox"/> College: 3 <input type="checkbox"/> Masters <input type="checkbox"/> 12/GED <input type="checkbox"/> College: 4 <input type="checkbox"/> Professional Degree <input type="checkbox"/> Vo/Tech Prog. <input type="checkbox"/> College: AA <input type="checkbox"/> JD/other law degree <input type="checkbox"/> College: 1 <input type="checkbox"/> College: BA/BS <input type="checkbox"/> Doctorate	
		17. Current Student Status <input type="checkbox"/> Full-Time Student <input type="checkbox"/> Part-Time Student <input type="checkbox"/> Not a Student	
18. High School Name		City, State, ZIP Code	Date of Diploma/GED (mm-yyyy)
19. Undergraduate Institution		Date of Degree (mm-yyyy)	20. Graduate Institution
Date of Degree (mm-yyyy)		Date of Degree (mm-yyyy)	Date of Degree (mm-yyyy)
City, State, ZIP Code, Country (if not U.S.)		Grade Point Avg. (on 4.0 scale)	City, State, ZIP Code, Country (if not U.S.)
Grade Point Avg. (on 4.0 scale)		Grade Point Avg. (on 4.0 scale)	Grade Point Avg. (on 4.0 scale)
Major		Minor	Major
Minor		Number of credit hours completed	Minor
Number of credit hours completed		Number of credit hours completed	Number of credit hours completed
Date From (mm-yyyy)		Date To (mm-yyyy)	Date From (mm-yyyy)
Date To (mm-yyyy)		Date To (mm-yyyy)	Date To (mm-yyyy)
<input type="checkbox"/> Quarter hours completed		<input type="checkbox"/> Quarter hours completed	<input type="checkbox"/> Quarter hours completed
<input type="checkbox"/> Semester hours completed		<input type="checkbox"/> Semester hours completed	<input type="checkbox"/> Semester hours completed
21. Do you have or have you had a Security Clearance? <input type="checkbox"/> Yes <input type="checkbox"/> No		22. First Foreign Language Proficiency (See Codes Page 2)	
If "YES", what type of clearance and who issued the clearance?		Second Foreign Language Proficiency (See Codes Page 2)	
		Speaking Proficiency Reading Proficiency	
		Speaking Proficiency Reading Proficiency	
		S R S R	
23. List any special skills (e.g. computer), experiences, current licenses, honors, awards, special accomplishments, and/or training (with date completed) relating to the position for which you are applying. Continue on Page 5, if necessary.		24. Original Signature (SIGN IN INK) I certify that all of the information on and attached to this application is true, correct, complete, and made in good faith.	
		Signature	
		25. Date Signed (mm-dd-yyyy)	

*The response time is an estimated average including the time needed to look for, get and provide the information required. You do not have to provide the information requested if the OMB approval has expired. We would appreciate any comments on the estimated responses and cost burdens, and recommendations for reducing them. Please send your comments to A/RPS/DIR, U.S. Department of State, Washington, DC 20520.

U.S. Department of State
Application for Employment (Con't)

Social Security Number _____ Last Name _____

Experience Block <div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto;"></div>	Type of Experience <input type="checkbox"/> Paid <input type="checkbox"/> Unpaid <input type="checkbox"/> Unemployed <input type="checkbox"/> Education	Full-Time/Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time If P/T, hours per week <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	Exact Title of Your Job <div style="border: 1px solid black; width: 100%; height: 40px; margin: 0 auto;"></div> Date From (mm-dd-yyyy) _____	To	Starting Salary _____ <input type="checkbox"/> Hr <input type="checkbox"/> Wk <input type="checkbox"/> Mo <input type="checkbox"/> Yr If present experience, mark box and leave "Date To" blank. <input type="checkbox"/> Present	Ending Salary _____ <input type="checkbox"/> Hr <input type="checkbox"/> Wk <input type="checkbox"/> Mo <input type="checkbox"/> Yr Date To (mm-dd-yyyy) _____
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Employer's Name and Address (include ZIP Code, if known)	If Federal employment, civilian or military, list series, grade or rank, and if promoted in this job, indicate the date of your last promotion.
Supervisor's Name, Area Code and Telephone Number	

Describe your duties and accomplishments (include any knowledge, skills, and abilities listed in the vacancy announcement that you have gained from this work experience).

Experience Block <div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto;"></div>	Type of Experience <input type="checkbox"/> Paid <input type="checkbox"/> Unpaid <input type="checkbox"/> Unemployed <input type="checkbox"/> Education	Full-Time/Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time If P/T, hours per week <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	Exact Title of Your Job <div style="border: 1px solid black; width: 100%; height: 40px; margin: 0 auto;"></div> Date From (mm-dd-yyyy) _____	To	Starting Salary _____ <input type="checkbox"/> Hr <input type="checkbox"/> Wk <input type="checkbox"/> Mo <input type="checkbox"/> Yr If present experience, mark box and leave "Date To" blank. <input type="checkbox"/> Present	Ending Salary _____ <input type="checkbox"/> Hr <input type="checkbox"/> Wk <input type="checkbox"/> Mo <input type="checkbox"/> Yr Date To (mm-dd-yyyy) _____
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