

SELECTIVE SERVICE SYSTEM

SKILLS QUESTIONNAIRE (RIPS/RIMS)

1					
Date Issued	•	Complete and Return Not I	ater Than		
ASW's Selective Service No., Full	Name, Complete Addre	ess	Alternative Ser	vice Office Number and .	Address
r		٦	Γ		٦
L		J	L		J
PURPOSE: This form is experience which will help	provided to help the Selective Se	you furnish in rvice System p	formation about your lace you in an alternal	education, skills, tive service job.	and work
INSTRUCTIONS: <u>COMI</u> and <u>DATE</u> the form in Sec	PLETE Sections I tion V and RETI	, II, III and IV I JRN the compl	by providing as much i eted form to the Alter	nformation as app native Service Of	olies to you. <u>SIGN</u> Fice.
NOTE: A prospective emp	loyer may requir	e you to comple	ete other documents d	uring the intervie	w/hiring process
Willful submission of false in five years or a fine of not mo	formation is a vio	lation of the law			
SECTION I - EDU	JCATION				
I completed: years	of high school	years of	f vocational/trade scho	oolyears	of college
My major field(s) of study i	n college was:	T-11.			
My minor field(s) of study i					
SECTION II - JOB	PREFERENCE	S			
On a scale of 1 to 5, here is number in each case.)	how I feel about	the following g	eneral aspects of pote	ntial jobs. (Circle	e the appropriate
	Strongly Dislike	Dislike Somewhat	Neutral or	Like Somewhat	Strongly

	Strongly Dislike	Dislike Somewhat	Neutral or Don't Know	Like Somewhat	Strongly Like
Outdoors	1	2	3	4	5
Using tools or equipment	1	2	3	4	5
Contact with public	1	$\frac{\overline{2}}{2}$	3	4	5
Stay in one place	1	$\bar{2}$	3	1	5
Hazardous	1	$\frac{\overline{2}}{2}$	3	4	5
Detail work	1	2	3	4	
Part of a team	1	$\tilde{2}$	3	4	5
Physical exertion	1	$\bar{2}$	3	4	5
Mental exertion	1	2	3	4	5

(Continue on reverse)

I would like to be considered for	or the tollowing	ng types of jobs	:		
(Circle the numbers that apply. you have and approximately ho	If you have pw many hour	previous experie s per week you	ence in any of these jobs, indicate how n worked.)	nany months	of experienc
	Months	Hours/Weeks		Months	Hours/Wee
O - Office			N - Nonconstruction Crafts & Main	tenance	
 1 - Clerical worker 2 - Bookkeeper 3 - Typist 4 - Computer programmer 5 - Computer operator 			 Telephone repairman Heating and air conditioning worker Office equipment repairman 		
S - Service	***************************************		4 - Automobile repairman 5 - Grounds worker		
0 - Dietary aide 1 - Waiter 2 - Housekeeper 3 - Messenger 4 - Grocery clerk 5 - Cook 6 - Child care worker 7 - Firefighter 8 - Gas station attendant 9 - Janitor E - Education 1 - Teacher aide 2 - Librarian 3 - Tutor 4 - Recreation aide - Industrial			H - Health 1 - Licensed practical nurse 2 - Physical therapist 3 - Orderly/nurses' aide 4 - Emergency medical technician 5 - X-Ray technician W - Social Service 1 - Counselor 2 - Social Worker 3 - Coach A - Art Design and Communication 1 - Artist 2 - Photographer 3 - Interpreter 4 - Cameraman (TV or Giname)		
1 - Machinist 2 - Printer	***************************************		4 - Cameraman (TV or Cinema)G - General1 - Administrator or Manager		
1 - Transportation1 - Car driver2 - Boat operator3 - Truck driver4 - Bus driver			2 - Salesman 3 - Laborer 4 - Religious group 5 - Other volunteer C - Construction		
- Technical			1 - Mason		

1 - Mason 2 - Carpenter

3 - Electrician

5 - Metal worker

6 - Heavy equipment operator

(Continue on reverse)

4 - Plumber

1 - Laboratory aide

2 - Draftsman

3 - Surveyor

4 - Farmer

SECTION III SKILLS AND SPECIAL QUALIFICATIONS I have the following skills, training and/or special qualifications: (Check as many as may apply.) EDU = Education Level Check Here Check Here GED = General Equivalency Diploma MTH = Mathematics HS High School Graduate NSC = Natural Science AA = Associate Degrees PAD = Public Administration BA = Bachelor of Arts SSC = Social Science BS = Bachelor of Science MA = Master of Arts SKL = Special Skill MS = Master of Science PHG = Photography MED = Master or Education MBA = Master of Business Admin. MDL = Model Building PHD = Doctorate WWK= Woodworking MTL = Machine Tools HSC = High School Courses MCH = Mechanics ELT = Electronics PHY = Physics PBS = Public Speaking CHM = ChemistryCKG = Cooking TRG = Trigonometry SEW = SewingAGR = Agriculture CHC = Child Care HME = Home Economics OEO = Office Equipment Operations BIO = Biology DRW = Drawing TYP = Typing WWK= Woodworking LNG = Foreign Language WLD = Welding MCH = Mechanics SPN = Spanish CMP = Computers FRN = French BKP = Bookkeeping GMN = German OTH = Other (Specify below) VT = Vocational Training TYP = TypingBKP = Bookkeeping MUS = Music CPG = Computer Programming OEM = Office Equipment Maint. VCL = Vocal SVY = Surveying INS = Instrumental ETC = **Engineering Technology** HAC = Heating and Air Cond. ATH = Athletics WWK= Woodworking ELT = Electronics SWM = **Swimming** PLB = Plumbing TNS = Tennis MSN = MasonryFTB = Football ENM = Engine Mechanics BSK = Basketball DSM = Diesel Mechanics TRK = Track BSB = Baseball CC = College Course LIC = License or Certificate AGR = Agriculture BUS = Business LSC = Life Saving Certificate COM = Computer CPR = Cardio-Pulmonary EDU = Education Resuscitation ENG = Engineering DRL = Driver's License FAD = Fine Arts and Drama CHL = Chauffeur's License HSC = Health Science BOL = Bus Operator's License HUM = Humanities PIL = Pilot's License LAN = Language SCL = State Contractor's License (Continue on reverse)

SSS FORM 156 (AUG 2000) OMB APPROVAL: 3240-0032

SECTIO	ON IV	PDOPOSED AT TE	RNATIVE SERVICE JOB			
SECTION						
	(Complete this sectio	n only if you have located a	a job which meets the standards	for alternative service work.)		
	like to be considered for your acceptance.	or a job with the employer	listed below. I have made tenta	tive arrangements with this employer		
Nan	ie of Employer:					
Con	tact Person:					
Add	ress:					
	TELEPHONE (IN	CLUDE AREA CODE)	FAX NUMBER	EMAIL ADDRESS		
SECTIO	DN V - CERTIFIC	ATION		**************************************		
			this form is true accurate and	complete to the best of my knowledge		
and	pelief.	mation I have provided on	tins form is true, accurate, and t	complete to the best of my knowledge		
-	(DATE)		(ALTERNATIVE SERVICE	WORKER'S SIGNATURE)		
·····						
		Privac	y Act Statement			
	The Military Selective Serv requested on this form. How	ice Act and Selective Service Re wever, you are not required to pro	gulations authorizes the Selective Servivide that information.	ce System to receive the information		
	The principal use of the recelassification promptly an	equested information is to assist d equitably. This information ma	the Selective Service to adjudicate y by be furnished to the following agencies	our claim for postponement and/or s for the purposes indicated:		
Department of Justice - to review and process suspected violations of the Military Selective Service Act and to litigate civil actions occurring under or incident to the Military Selective Service Act.						
Federal Bureau of Investigation - to locate an individual suspected of violation of the Military Selective Service Act.						
Immigration and Naturalization Service - to provide information for use in determining an individual's eligibility for reentry into the United States and for United States citizenship.						
:	Department of State - for d	etermination of an alien's eligibil	ity for possible entry into the United Sta	ates and United States citizenship.		
1	Department of Health and	Human Services - to locate pare	nts pursuant to the Child Support Enforce	cement Act (42 U.S.C. 651 et seq).		
i i	Your failure to provide the insufficient information.	equested information may result	in denial of your claim for postponeme	nt and/or reclassification because of		

PROCEDURAL DIRECTIVE SKILLS QUESTIONNAIRE SSS FORM 156 (RIPS/RIMS)

(

1. PURPOSE

This form is used to obtain information concerning an Alternative Service Worker's education, training and experience. The data will help the Alternative Service Office in placing him in an alternative service job.

2. PREPARATION

Prepared in original only by the Alternative Service Worker.

1

3. <u>DISTRIBUTION</u>

The Area Office gives to Alternative Service Worker as an attachment to the Order to Report for Alternative Service (SSS Form 155). The Area Office sends the completed form to the Alternative Service Office to which they have assigned the Alternative Service Worker.

4. <u>DISPOSAL</u>

Retained in and destroyed with the Alternative Service File Folder (SSS Form 101A).