



SELECTIVE SERVICE SYSTEM

SKILLS QUESTIONNAIRE (RIPS/RIMS)

Date Issued

Complete and Return Not Later Than

ASW's Selective Service No., Full Name, Complete Address

Alternative Service Office Number and Address

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PURPOSE: This form is provided to help you furnish information about your education, skills, and work experience which will help the Selective Service System place you in an alternative service job.

INSTRUCTIONS: COMPLETE Sections I, II, III and IV by providing as much information as applies to you. SIGN and DATE the form in Section V and RETURN the completed form to the Alternative Service Office.

NOTE: A prospective employer may require you to complete other documents during the interview/hiring process

Willful submission of false information is a violation of the law and, upon conviction, is punishable by imprisonment for up to five years or a fine of not more than \$250,000, or both.

SECTION I - EDUCATION

I completed: _____ years of high school _____ years of vocational/trade school _____ years of college

My major field(s) of study in college was: _____

My minor field(s) of study in college was: _____

SECTION II - JOB PREFERENCES

On a scale of 1 to 5, here is how I feel about the following general aspects of potential jobs. (Circle the appropriate number in each case.)

	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	2	3	4	5
Stay in one place	1	2	3	4	5
Hazardous	1	2	3	4	5
Detail work	1	2	3	4	5
Part of a team	1	2	3	4	5
Physical exertion	1	2	3	4	5
Mental exertion	1	2	3	4	5

(Continue on reverse)

I would like to be considered for the following types of jobs:

(Circle the numbers that apply. If you have previous experience in any of these jobs, indicate how many months of experience you have and approximately how many hours per week you worked.)

	Months	Hours/Weeks		Months	Hours/Weeks
O - Office			N - Nonconstruction Crafts & Maintenance		
1 - Clerical worker	—	—	1 - Telephone repairman	—	—
2 - Bookkeeper	—	—	2 - Heating and air conditioning worker	—	—
3 - Typist	—	—	3 - Office equipment repairman	—	—
4 - Computer programmer	—	—	4 - Automobile repairman	—	—
5 - Computer operator	—	—	5 - Grounds worker	—	—
S - Service			H - Health		
0 - Dietary aide	—	—	1 - Licensed practical nurse	—	—
1 - Waiter	—	—	2 - Physical therapist	—	—
2 - Housekeeper	—	—	3 - Orderly/nurses' aide	—	—
3 - Messenger	—	—	4 - Emergency medical technician	—	—
4 - Grocery clerk	—	—	5 - X-Ray technician	—	—
5 - Cook	—	—	W - Social Service		
6 - Child care worker	—	—	1 - Counselor	—	—
7 - Firefighter	—	—	2 - Social Worker	—	—
8 - Gas station attendant	—	—	3 - Coach	—	—
9 - Janitor	—	—	A - Art Design and Communication		
E - Education			1 - Artist	—	—
1 - Teacher aide	—	—	2 - Photographer	—	—
2 - Librarian	—	—	3 - Interpreter	—	—
3 - Tutor	—	—	4 - Cameraman (TV or Cinema)	—	—
4 - Recreation aide	—	—	G - General		
I - Industrial			1 - Administrator or Manager	—	—
1 - Machinist	—	—	2 - Salesman	—	—
2 - Printer	—	—	3 - Laborer	—	—
D - Transportation			4 - Religious group	—	—
1 - Car driver	—	—	5 - Other volunteer	—	—
2 - Boat operator	—	—	C - Construction		
3 - Truck driver	—	—	1 - Mason	—	—
4 - Bus driver	—	—	2 - Carpenter	—	—
T - Technical			3 - Electrician	—	—
1 - Laboratory aide	—	—	4 - Plumber	—	—
2 - Draftsman	—	—	5 - Metal worker	—	—
3 - Surveyor	—	—	6 - Heavy equipment operator	—	—
4 - Farmer	—	—			

(Continue on reverse)

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

- GED = General Equivalency Diploma
- HS = High School Graduate
- AA = Associate Degrees
- BA = Bachelor of Arts
- BS = Bachelor of Science
- MA = Master of Arts
- MS = Master of Science
- MED = Master of Education
- MBA = Master of Business Admin.
- PHD = Doctorate

HSC = High School Courses

- PHY = Physics
- CHM = Chemistry
- TRG = Trigonometry
- AGR = Agriculture
- HME = Home Economics
- BIO = Biology
- TYP = Typing
- WWK = Woodworking
- WLD = Welding
- MCH = Mechanics
- CMP = Computers
- BKP = Bookkeeping

VT = Vocational Training

- TYP = Typing
- BKP = Bookkeeping
- CPG = Computer Programming
- OEM = Office Equipment Maint.
- SVY = Surveying
- ETC = Engineering Technology
- HAC = Heating and Air Cond.
- WWK = Woodworking
- ELT = Electronics
- PLB = Plumbing
- MSN = Masonry
- ENM = Engine Mechanics
- DSM = Diesel Mechanics

CC = College Course

- AGR = Agriculture
- BUS = Business
- COM = Computer
- EDU = Education
- ENG = Engineering
- FAD = Fine Arts and Drama
- HSC = Health Science
- HUM = Humanities
- LAN = Language

Check Here

Check Here

- MTH = Mathematics
- NSC = Natural Science
- PAD = Public Administration
- SSC = Social Science

SKL = Special Skill

- PHG = Photography
- MDL = Model Building
- WWK = Woodworking
- MTL = Machine Tools
- MCH = Mechanics
- ELT = Electronics
- PBS = Public Speaking
- CKG = Cooking
- SEW = Sewing
- CHC = Child Care
- OEO = Office Equipment Operations
- DRW = Drawing

LNG = Foreign Language

- SPN = Spanish
- FRN = French
- GMN = German
- OTH = Other (Specify below)

MUS = Music

- VCL = Vocal
- INS = Instrumental

ATH = Athletics

- SWM = Swimming
- TNS = Tennis
- FTB = Football
- BSK = Basketball
- TRK = Track
- BSB = Baseball

LIC = License or Certificate

- LSC = Life Saving Certificate
- CPR = Cardio-Pulmonary Resuscitation
- DRL = Driver's License
- CHL = Chauffeur's License
- BOL = Bus Operator's License
- PIL = Pilot's License
- SCL = State Contractor's License

(Continue on reverse)

SECTION IV

PROPOSED ALTERNATIVE SERVICE JOB

(Complete this section only if you have located a job which meets the standards for alternative service work.)

I would like to be considered for a job with the employer listed below. I have made tentative arrangements with this employer subject to your acceptance.

Name of Employer: _____

Contact Person: _____

Address: _____

TELEPHONE (INCLUDE AREA CODE)

FAX NUMBER

EMAIL ADDRESS

SECTION V - CERTIFICATION

I certify that all of the information I have provided on this form is true, accurate, and complete to the best of my knowledge and belief.

(DATE)

(ALTERNATIVE SERVICE WORKER'S SIGNATURE)

Privacy Act Statement

The Military Selective Service Act and Selective Service Regulations authorizes the Selective Service System to receive the information requested on this form. However, you are not required to provide that information.

The principal use of the requested information is to assist the Selective Service to adjudicate your claim for postponement and/or reclassification promptly and equitably. This information may be furnished to the following agencies 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 determination of an alien's eligibility for possible entry into the United States and United States citizenship.

Department of Health and Human Services - to locate parents pursuant to the Child Support Enforcement Act (42 U.S.C. 651 et seq).

Your failure to provide the requested information may result in denial of your claim for postponement and/or reclassification because of insufficient information.

**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.

3. DISTRIBUTION

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. DISPOSAL

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