



Please type or print

Background

Position for Which Application is Made		Date of Application	Date Available
Full Name			
First	Middle	Last	Previous, If Any
Address			
Number and Street		City	State ZIP Code
E-mail Address			
Telephone (Include Area Code)			
Home	Office	Cell	
Are you a United States citizen? ___ Yes ___ No			
How did you learn about this position?			

Education and Training*

Name and Complete Address of Schools Attended	From		To		Graduate		Year Graduated	Type of Degree	Major Subjects	Minor Subjects
	Mo.	Yr.	Mo.	Yr.	Yes	No				
High School										
College—Attendance or degrees from accredited schools										
Graduate School—Attendance or degrees from accredited schools										
Technical/Other Training Schools										

*Note: Provide an explanation for incomplete schooling or training.

Titles of Publication(s), Thesis, etc.

Professional Licenses and Memberships

Typing Speed	Computer Skills/Other Training or Skills
_____ wpm	

Employment Record

Please list all employment. If you were employed under a different name than shown on page one, please indicate.

Current Employment (Month & Year) From _____ To _____		Title of Position	Classification Grade (If in Federal Service)	Salary or Earnings	
				Start	Current
				Base	_____
Name and Address of Employer		Immediate Supervisor		Supplemental (Itemize)	
		Name _____		_____	_____
		Telephone _____		_____	_____
		May we contact this person? ___ Yes ___ No		_____	_____
Reason for Desiring to Change Employment				Number of Hours Worked Per Week	
Date of Last Promotion		Date of Last Salary Increase		Amount of Increase	

Brief Description of Duties and Responsibilities

Previous Employment (Month & Year) From _____ To _____		Title of Position	Classification Grade (If in Federal Service)	Salary or Earnings	Start	End
				Base	_____	_____
				Supplemental	_____	_____
Name and Address of Employer			Immediate Supervisor		May we contact this person?	
			Name _____		_____ Yes ___ No	
			Telephone _____		_____ Yes ___ No	
Reason for Desiring to Change Employment				Number of Hours Worked Per Week		

Brief Description of Duties and Responsibilities

Previous Employment (Month & Year) From _____ To _____		Title of Position	Classification Grade (If in Federal Service)	Salary or Earnings	Start	End
				Base	_____	_____
				Supplemental	_____	_____
Name and Address of Employer			Immediate Supervisor		May we contact this person?	
			Name _____		_____ Yes ___ No	
			Telephone _____		_____ Yes ___ No	
Reason for Desiring to Change Employment				Number of Hours Worked Per Week		

Brief Description of Duties and Responsibilities

Previous Employment (Month & Year) From _____ To _____	Title of Position	Classification Grade (If in Federal Service)	Salary or Earnings Base _____ Supplemental _____	Start _____	End _____
Name and Address of Employer		Immediate Supervisor Name _____ Telephone _____		May we contact this person? ____ Yes ____ No	
Reason for Desiring to Change Employment			Number of Hours Worked Per Week		

Brief Description of Duties and Responsibilities

Previous Employment (Month & Year) From _____ To _____	Title of Position	Classification Grade (If in Federal Service)	Salary or Earnings Base _____ Supplemental _____	Start _____	End _____
Name and Address of Employer		Immediate Supervisor Name _____ Telephone _____		May we contact this person? ____ Yes ____ No	
Reason for Desiring to Change Employment			Number of Hours Worked Per Week		

Brief Description of Duties and Responsibilities

Previous Employment (Month & Year) From _____ To _____	Title of Position	Classification Grade (If in Federal Service)	Salary or Earnings Base _____ Supplemental _____	Start _____	End _____
Name and Address of Employer		Immediate Supervisor Name _____ Telephone _____		May we contact this person? ____ Yes ____ No	
Reason for Desiring to Change Employment			Number of Hours Worked Per Week		

Brief Description of Duties and Responsibilities

If there are any gaps in your employment record, please explain below.

References

List three persons who are not related to you and who have definite knowledge of your ability to perform the duties of the position for which you are applying. Do not repeat the names of supervisors listed under "Employment Record."

Name	Address (Include ZIP Code)	Telephone (Include Area Code)	Title or Occupation

General (If you answer Yes to any of these questions, explain fully in the Remarks section. A Yes response to any one of these questions may have an effect on whether the Board hires you based upon federal law, regulations, and the Board's policies. Please give the question number in your explanation.)

Yes No

- ___ ___ 1. During the last 7 years, have you ever been convicted of a crime, imprisoned, on probation, or on parole? (You must include felonies, firearms or explosives violations, military court-martials, misdemeanors, and any other matter that was resolved by a plea of nolo contendere (no contest). However (you may omit: [a] minor traffic violations that resulted in a fine of \$300 or less; [b] any offense committed before your 16th birthday; [c] any offense committed before your 18th birthday that was finally adjudicated in a juvenile court or under a youth offender law; and [d] any conviction in which the record has been expunged under federal or state law or set aside under the Federal Youth Corrections Act or similar state law.) Note: A criminal conviction is not an absolute bar to employment but will be considered in relation to specific job requirements.
- ___ ___ 2. Are you now under charges, on trial, or awaiting trial on criminal charges for any violation of law (such as a misdemeanor or a felony)?
- ___ ___ 3. Are you delinquent on any federal debt (e.g., federal taxes, loans, overpayment of benefits, defaults on guaranteed or insured loans)?
- ___ ___ 4. Have you ever been discharged or asked to resign from any position, or have you resigned after having been informed that your employer intended to discharge you?
- ___ ___ 5. Do you receive any annuity from the United States or District of Columbia governments under any retirement act or any pension or compensation for military service?
- ___ ___ 6. Are you related to or acquainted with any employee of the Board of Governors of the Federal Reserve System?
- ___ ___ 7. Are you related to any officer or director of a financial and/or banking institution?
- ___ ___ 8. Do you, your spouse, or your minor children own debt (bonds) or equity (stock) of a bank, thrift, or other depository institution or its affiliates, or of a primary government securities dealer or its affiliates?
- ___ ___ 9. Are you willing to travel in connection with your duties? (Yes response does not require an explanation.)

Remarks (Attach any other information you feel reflects your qualifications for the position for which you are applying.)

Notes

College graduates: a copy of your college transcript is requested prior to employment. Male applicants born after December 31, 1959, must be registered with the Selective Service System or have a valid exemption in order to be eligible for Board employment. You will be required to certify your status at the time of employment.

A background security investigation will be required for all new hires. Appointment will be subject to the applicant's successful completion of a background security investigation and favorable adjudication. Failure to successfully meet these requirements will be grounds for termination.

Some persons employed by the Board must satisfactorily complete a physical examination and may be subject to drug testing.

Persons employed by the Board are required to provide information showing their legal entitlement to work in the United States.

All positions at the Board are appointed without regard to the provisions of the classified civil service except politically appointed positions.

Applications are retained in our active file for one year. Applicants who wish consideration beyond this time must reapply.

Those employed by the Board must abide by the Standards of Ethical Conduct for Employees of the Executive Branch.

Disclosure of previous names used by an applicant after the applicant has reached the legal age of employment is necessary to confirm an applicant's employment record.

For information on alternative formats or questions for persons with disabilities, or if you need assistance completing the application because of a disability, contact the Board's Human Resources Function, Recruiting Office at 202-452-3880, TDD (Telecommunications Device for the Deaf) 202-872-4984.

The Board of Governors of the Federal Reserve System has:

- 1. Adopted regulations and procedures to assure equal opportunity in employment for all persons; to prohibit discrimination in employment because of race, religion, color, national origin, sex, physical or mental disability, or age; and to promote the full realization of equal employment through a positive continuing program in every aspect of Board personnel policy and practice. An aggrieved applicant for employment who believes that he or she has been discriminated against because of race, religion, color, national origin, sex, disability, or age should consult with an EEO Counselor within 45 days of the date of the event he or she believes was discriminatory. A list of EEO Counselors can be obtained from the Division of Human Resources Management.
- 2. Rules regarding financial interests of employees that restrict ownership by employees, their spouses, and their minor children of debt (bonds) or equity (stock) of banks, thrifts, and other depository institutions or their affiliates and of primary government securities dealers or their affiliates. Questions should be directed to the Ethics Officer in the Board's Legal Division.

I certify that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, and complete and made in good faith. I consent to the release of information about my ability and fitness for Board 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 understand that false or fraudulent information on or attached to this application may be grounds for not hiring me or for firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated. I have read and understand the Privacy Act Statement issued by the Board pursuant to the Privacy Act of 1974 and provided to me in connection with the application.

Applicant's Signature

PAPER REDUCTION ACT NOTICE

This application for employment is authorized by law [12 U.S.C. §§ 244 and 248(1)]. Public reporting burden for this employment application is estimated to average one hour per response, including the time to gather the information in the required form and to review instructions and complete the application.

Send comments regarding this burden estimate or any other aspect of this employ -ment application, including suggestions for reducing this burden, to Secretary, Board of Governors of the Federal Reserve System, 20th and C Streets, NW, Washington, DC 20551; and to the Office of Management and Budget, Paperwork Reduction Project (7100-0181), Washington, DC 20503.