

## EMPLOYMENT APPLICATION FOR LOCALLY EMPLOYED STAFF OR FAMILY MEMBER

POSITION						
/acancy Announcement Number			Position Title			
SECTION 1: PERSONAL INFORMATIO		SE COMPLET				
Name (Last, First or Given Name)						
Other Names Used						
Address						
Email			Telephone Number			
Does your relative work in this Embassy or Consu	late? If ye	s, tell us their na	ame and the se	ction w	here they work.	
Are you able to legally work in this country? (U.S. Government does not sponsor work visas up	nless spec		No ancy Announce	ement.)	)	
If this job includes driving a U.S. Government veh	icle, do yo	u have a current	t and valid drive	er's lice	ense? Yes	No
SECTION 2: EDUCATION						_
High School/Secondary Education		Dates Attended	,			
(Name, City)	Fro	(mm-yyyy)	gradua	es		
	То	n		lo		
Trade/Technical (Name, City)		Dates Attended (mm-yyyy)	Did y gradua		Certificate/Diploma	Major Subject
	Fro	n	_  🛛 Y	es		
	То			0		
Undergraduate/Bachelor's Degree (Name, City)		Dates Attended (mm-yyyy)	Did y gradua		Degree/Diploma	Major Subject
	Fro	n	—   🗖 Y	es		
	То		□ ▷	о		
Graduate Degree (Name, City)		Dates Attended (mm-yyyy)	gradua	ate?	Degree/Diploma	Major Subject
	Fro	m	LJ <sup>v</sup>	es		
	То			0		
SECTION 3: LANGUAGES						
Languages <b>1 Basic</b> - Examples: Basic greetings, phras <b>2 Limited</b> - Examples: Directions, simple qu <b>3 Good working knowledge</b> - Examples: 0 <b>4 Fluent</b> - Examples: Infer nuanced meanin <b>5 Translator</b> - Examples: Certified profession	uestions Conversati g from col	ons about familiann plex document	S	blex do	cuments	
		Speaking (Pro			ling (Provide level)	Writing (Provide level)
						· · · ·

SECTION 4: W	ORK EXPERIE	NCE				
Paid and Volunta	<b>ry</b> - Please begin by	listing you	r most current work experience and go back 10	0 years (or longer, if relevant for the job.)		
Job Title						
From (mm-yyyy)	То (тт-уууу)	Yearly S	alary (Local currency)	Hours per Week		
Employer Name, A	Employer Name, Address and Phone Number					
Supervisory Respo	Supervisory Responsibilities? Supervisor Name					
Main Duties and R	esponsibilities					
Reason for leaving						
Job Title						
From (mm-yyyy)	То (тт-уууу)	Yearly S	alary (Local currency)	Hours per Week		
Employer Name, A	Employer Name, Address and Phone Number					
Supervisory Respo	Supervisory Responsibilities? Supervisor Name   Yes No					
Main Duties and R	esponsibilities					
Reason for leaving						
Job Title						
From (mm-yyyy)	То (тт-уууу)	Yearly S	alary (Local currency)	Hours per Week		
Employer Name, Address and Phone Number						
Supervisory Responsibilities? Supervisor Name   Yes No						
Main Duties and Responsibilities						
Reason for leaving						

Job Title								
From (mm-yyyy)	n (mm-yyyy) To (mm-yyyy) Yearly Salary (Local currency) Hours per Week							
Employer Name, A	Address and Phone N	lumber						
Supervisory Responsibilities? Supervisor Name								
Main Duties and R	esponsibilities							
Reason for leaving	)							
SECTION 5: C	ITIZENSHIP							
	(not TDY) to this U.S Section 6.		ency equivalent) of a direct hire FS, CS or uniformed service ority, or to an office of the American Institute in Taiwan?					
I am a memb	I am a member of the Foreign Service Family Reserve Corps (FSFRC). (SF-50 required)							
I am a preference eligible U.S. Veteran. I have not invoked my preference at this Post. (DD214 required)								
I am a preference eligible U.S. Veteran. I have invoked my preference at this Post. I have worked in (enter Agency/job)								
I am Foreign Service on Leave Without Pay (LWOP).								
I am Civil Service on LWOP with Bureau-specific reemployment rights.								
SECTION 6: D	ECLARATION							
made in go separation/	ood faith. I understan /dismissal after I beg	d that false or fraudulent information on or a	on and attached to this application is true, correct, complete, and attached to this application may be grounds for not hiring me, or for mprisonment according to this country's law or U.S. law. I application may be investigated.					
PRIVACY AND PAPERWORK REDUCTION ACT STATEMENTS (For U.S. Citizens and Legal Permanent Residents of the U.S.)								
AUTHORITIES The information is sought pursuant to The Foreign Service Act of 1980, as amended, and 22 U.S.C. 2669(c). Your social security number (SSN) maybe used to confirm the identity and employment eligibility of the individual, pursuant to Executive Order 9397, as amended.								
PURPOSE The information solicited on this form will be used to establish your eligibility and qualifications for job vacancies at U.S. Missions.								
ROUTINE USES The information may be shared with other federal agencies to the extent relevant and necessary for that agency to make employment decisions and to a Congressional Office in response to your written request. More information on Routine Uses can be found in System of Records Notices State-31, Human Resource Records, and OPM/GOVT-5, Recruiting, Examining, and Placement Records.								
DISCLOSURE Disclosure of this information, including your social security number, is voluntary. Failure to provide the requested information may result in your application not receiving full consideration or being delayed for consideration.								
<b>BURDEN</b> Public reporting burden for this collection of information is estimated to average one (1) hour per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: HR/OE, SA-22, 1800 G Street, NW, Washington, DC 20006.								
		EQUAL OPPORTUNIT	Y EMPLOYER					
		and fair and equitable treatment in employment for rotected genetic information, or sexual orientation	to all people without regard to race, color, religion, sex, national origin, age, n.					
			ed equal opportunity based upon marital status or political affiliation. ures, remedies for prohibited personnel practices, and/or courts for relief.					

SECTION 4. WORK EXPERIENCE (Continued)

# EMPLOYMENT APPLICATION FOR LOCALLY EMPLOYED STAFF OR FAMILY MEMBER INSTRUCTIONS

### **SECTION 1 - PERSONAL INFORMATION**

Name - Last Name, First Name

Other names used - All other names used, including nicknames

Address - Current mailing address, including apartment number, building number, or mailing code

Email - Complete email address. (IMPORTANT: Most correspondence will be via email.)

Phone Number - Cellphone, mobile or landline

#### Does your relative work in this Embassy or Consulate?

Relative is a husband, wife, domestic partner, member of household, father, father-in-law, stepfather, mother, mother-in-law, stepmother, son, son-in-law, stepson, daughter, daughter-in-law, stepdaughter, brother, brother-in-law, half-brother, sister, sister-in-law, half-sister, uncle, aunt, first cousin, nephew, or niece.

#### **SECTION 2 - EDUCATION**

Enter all that apply. You may be asked to provide a copy of your diploma or certification at the interview phase, or if asked by HR.

#### **SECTION 3 - LANGUAGES**

The Mission assesses the language proficiency using the following standards:

- 1 Basic Examples: I can use basic greetings and phrases; I can read numbers and signs.
- 2 Limited Examples: I can give basic directions, simple questions
- 3 Good working knowledge Examples: Conversations about familiar topics, complex documents
- 4 Fluent Examples: Infer nuanced meaning from complex documents
- 5 Translator Examples: Certified professional translator in this language

List language proficiency and identify the level for Speaking, Reading and Writing for each. The Vacancy Announcement states whether these languages will or may be tested.

Language	Speaking (Provide level)	Reading (Provide level)	Writing (Provide level)
English	4 Fluent	4 Fluent	4 Fluent
Italian	2 Limited	1 Basic	1 Basic

#### **SECTION 4 - WORK EXPERIENCE**

Paid and Voluntary - Start with current experience and go back 10 years or longer, if relevant to this job.

Please complete all required information to the best of your knowledge. You must provide the month and year of your employment. If you need additional space, please attach additional pages to your application.

Job Title				
Secretary				
From (mm-yyyy)	То (тт-уууу)	Yearly S	alary (Local currency)	Hours per Week
03-2001	03-2010		\$20,000	30
Employer Name, A	ddress and Phone N	umber		
Dick Smith Law Firm, 26 Main Street, Cairns QLD 4870, 07-555-5555				
Supervisory Responsibilities?		Supervisor Name		
Yes X No		Peter Smith		
Main Duties and Re	esponsibilities			
I typed legal documents and answered the telephone for two lawyers. I collected and distributed the mail. I made appointments				
Reason for leaving				
I went to University of Queensland.				
	• •			
SECTION 5 - FOR U.S. CITIZENS ONLY				

Select all that apply and include the required documents (as stated) with the application. Additional documents may be requested by HR at the interview phase.

#### SECTION 6 - DECLARATION

All applicants must read the declaration and mark their agreement to proceed with the application.