Job Application Information and Supplemental Voluntary Applicant Information

Decennial Census Temporary, Intermittent Applicant Information Collection

4/30/2025

United States® Census Bureau

Account Creation

United States Census Bureau

Welcome to the 2026 Census Test Job Portal

United States Census Bureau

This U.S. Federal Government system is to be used by authorized users only. Information from this system resides on computer systems funded by the government. The data and documents on this system include federal records that may contain sensitive information protected by various federal statutes, including the Privacy Act, 5 U.S.C. § 552a.

All access or use of this system constitutes user understanding and acceptance of these terms and constitutes unconditional consent to review, monitoring and action by all authorized government and law enforcement personnel. While using this system your use may be monitored, recorded and subject to audit.

Authorized use of this system includes completion of the job application, onboarding, and employment processes associated with U.S. Census Bureau jobs.

Unauthorized user attempts or acts to (1) access, upload, change, or delete or deface information on this system, (2) modify this system, (3) deny access to this system, (4) accrue resources for unauthorized use or (5) otherwise misuse this system are strictly prohibited. Such attempts or acts are subject to action that may result in criminal, civil, or administrative penalties.

This information system may contain Controlled Unclassified Information (CUI) that is subject to safeguarding or dissemination controls in accordance with law, regulation, or Government-wide policy.

For more information about 2026 Census jobs, please go to www.census.gov/2026jobs. To apply, please choose from the following:

Create an Account | Sign In

Questions? FAQs | Contact Us: 833-893-2026 | census.gov/2026jobs
The U.S. Census Bureau is an Equal Opportunity Employer.

Account Creation

Provide your legal full name (First, Middle, Last, Suffix)

Do NOT use nicknames. This name will be transferred to your job application.

If you do not have a first name, then select the "I do NOT have a first name" option. If you have a middle name, please enter your full middle name not just the initial. If you do not have a middle name, select the "I do NOT have a middle name" option. If you do not have a last name, then select the "I do NOT have a last name" option. If you are a "Jr.", "Sr.", etc. select an option under Suffix.

*First Name

*Middle Name

I do NOT have a First Name

I do NOT have a Middle Name

*Last Name

Suffix

None

I do NOT have a Last Name

*Email Address

*Phone

###-###-####

Is this a mobile phone?

Yes

No

Do we have permission to text you?

Yes

No

Standard data fees and text messaging rates may apply based on your plan with your mobile phone carrier.

*Password

*Confirm Password

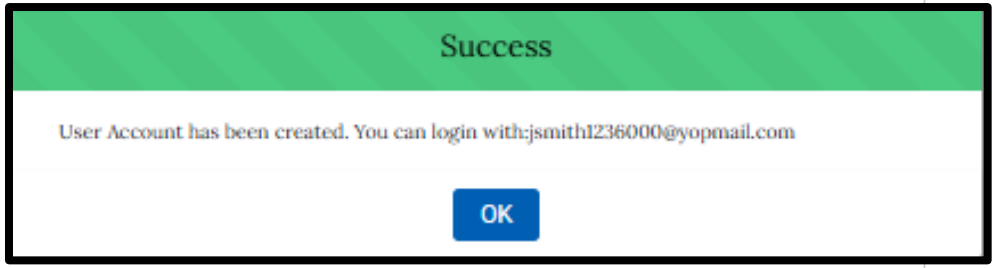
Create Account

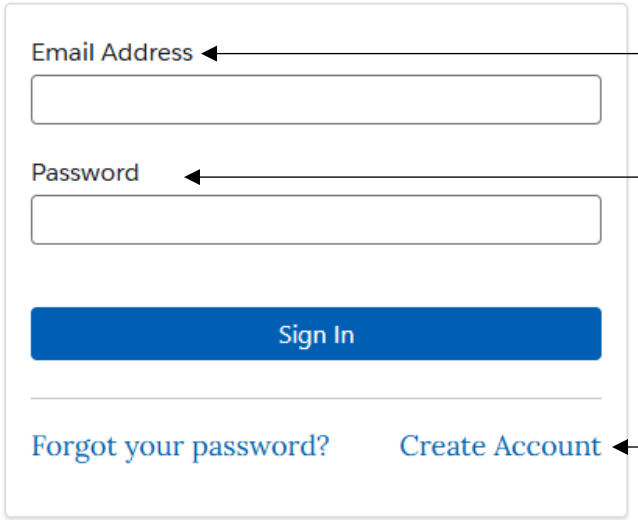
If the applicant hovers over the information icon, then the below message appears:

Enter your name as it appears on your federal, state, or foreign legal identification documentation.

If the applicant attempts to create a password that does not meet the requirements, then the following error message appears: *Passwords must contain at least fifteen (15) non-blank characters. Characters must meet at least three (3) of the following four (4) categories: English upper-case characters (A-Z); English lower-case characters (a-z); Base 10 digits (0-9); Non-Alphanumeric (ex. !, $, #).*

Once the applicant clicks the Create Account button and successfully creates their account, the following pop-up appears:





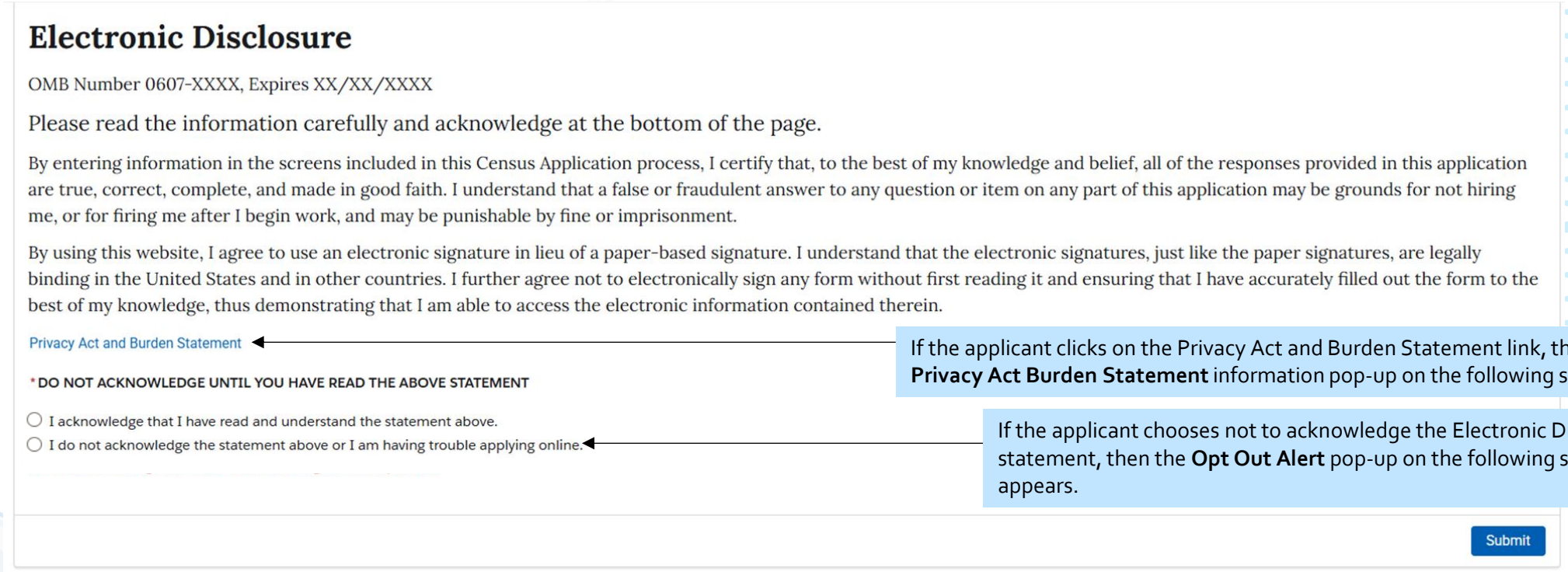
If the applicant attempts to sign in with an incorrect Email Address and/or Password, then the following error message appears: *Your login attempt has failed. Make sure the username and password are correct*.

If the applicant attempts to sign in with the Email Address field blank, then the following error message appears: *Enter a value in the User Name field*.

If the applicant attempts to sign in with the Password field blank, then the following error message appears: *Enter a value in the Password field*.

If the applicant clicks the *Create Account* link, then the applicant is taken to the **Account Creation** screen.

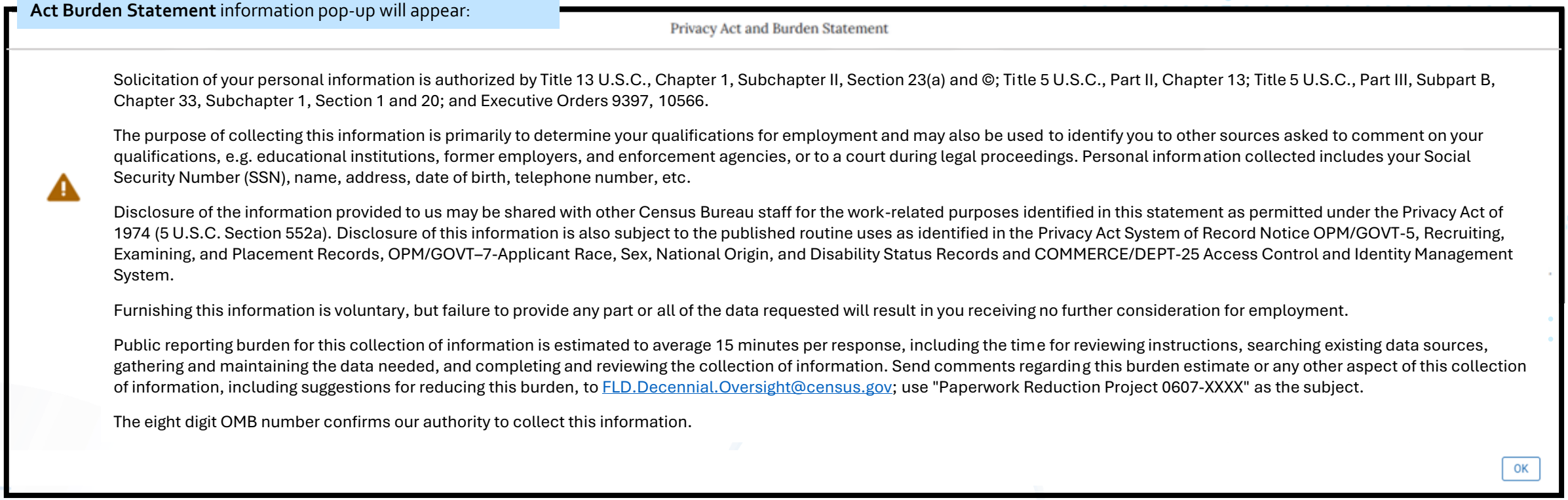
Job Application Information



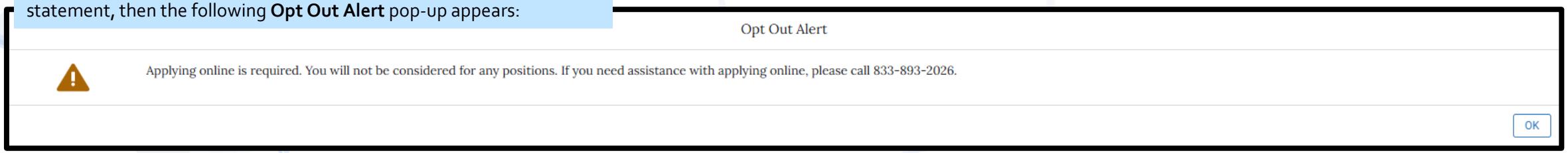
If the applicant clicks on the Privacy Act and Burden Statement link, then the **Privacy Act Burden Statement** information pop-up on the following slide appears.

If the applicant chooses not to acknowledge the Electronic Disclosure statement, then the **Opt Out Alert** pop-up on the following slide appears.

If the applicant clicks the Privacy Act and Burden Statement link on the Electronic Disclosure screen, then the following **Privacy Act Burden Statement** information pop-up will appear:



If the applicant chooses not to acknowledge the Electronic Disclosure statement, then the following **Opt Out Alert** pop-up appears:



How do I complete the Census Job Application?

You will see the information icon ⓘ on some items.

Hover over the icon for detailed instructions or information about completing the associated item. As you complete the application, you may receive pop-up messages pointing out potential errors, giving warnings, or providing you with additional information about your response. Please read and follow the instructions noted within the messages.

Depending on your responses to certain questions, you may be asked to upload documentation to support those responses. For example, if you are a Veteran and you are claiming preference you may need to upload a SF-15 and/or DD-214.

If any of the following apply to you, you may need to upload documentation:

- You are a Veteran and are claiming preference.
- You were born a male after December 31, 1959, and did not register for Selective Service.
- You are a Federal Annuitant.
- You received a Voluntary Separation Incentive Payment (VSIP or "Buyout") in the last five years.

To upload a document, please select the "Upload" button and select the appropriate file from your device or drag and drop the file from your device to the "Drop File" box. The file name will appear once the file is uploaded.

You will be asked to confirm and electronically sign your entries on the job application once it is complete. In addition, you must also complete a set of assessment questions and submit your answers before your application will be submitted.

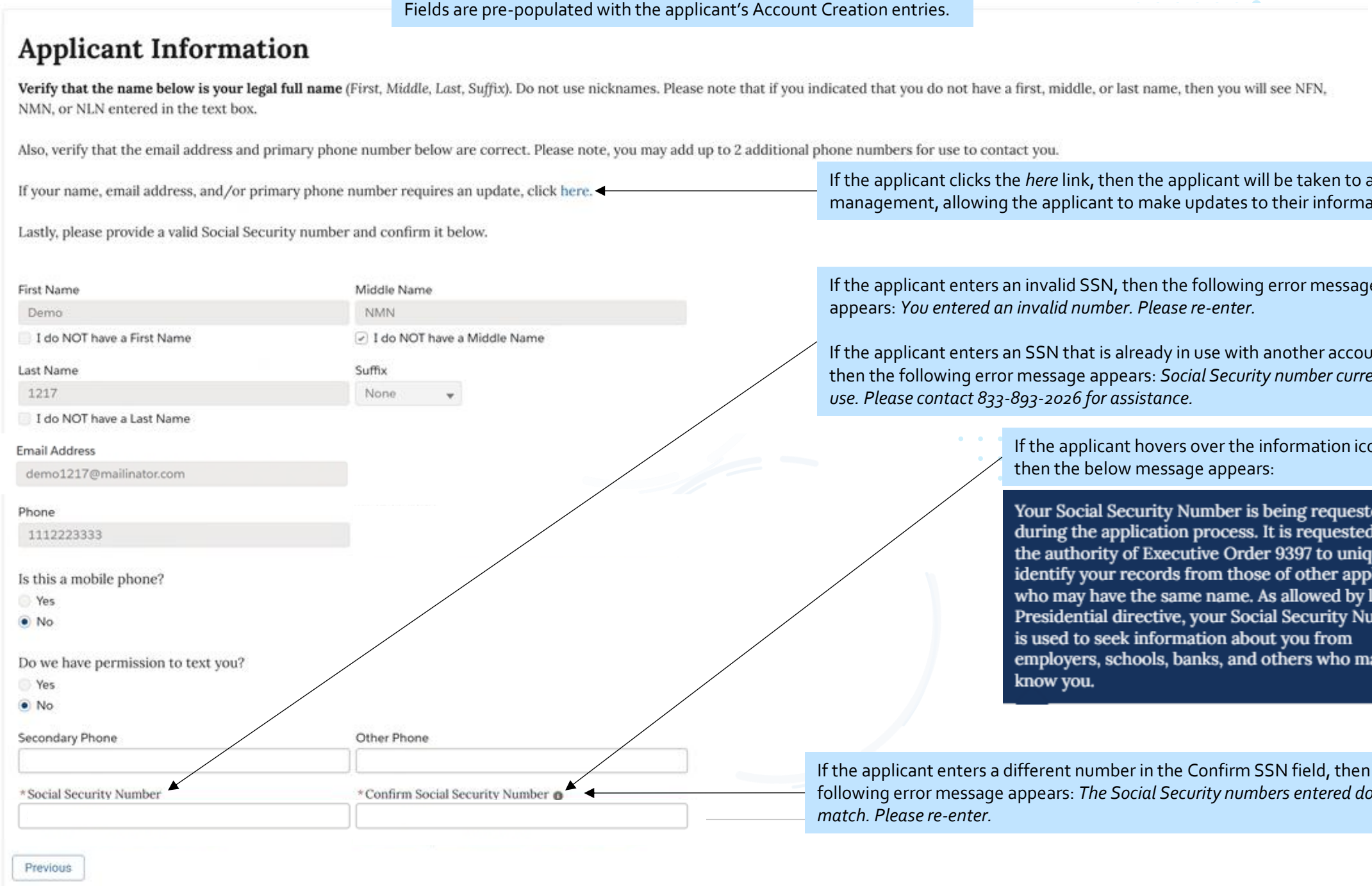
All applicants will be required to answer assessment questions.

What are the assessment questions like?

The assessment questions are designed to indicate your fit for a variety of Census jobs. By submitting one application and answering the non-supervisory positions assessment questions, you may be considered for several positions. If you are interested in supervisory positions, you will need to answer additional supervisory assessment questions.

Next

Fields are pre-populated with the applicant's Account Creation entries.



If the applicant clicks the *here* link, then the applicant will be taken to account management, allowing the applicant to make updates to their information.

If the applicant enters an invalid SSN, then the following error message appears: *You entered an invalid number. Please re-enter.*

If the applicant enters an SSN that is already in use with another account, then the following error message appears: *Social Security number currently in use. Please contact 833-893-2026 for assistance.*

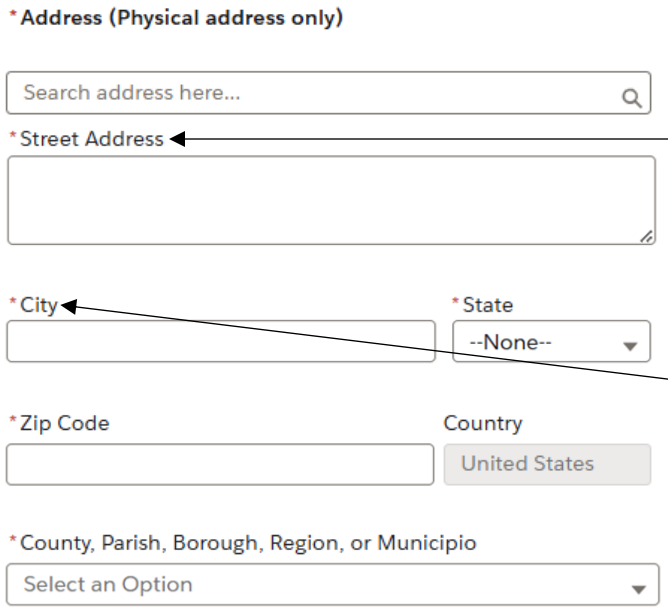
If the applicant hovers over the information icon, then the below message appears:

Your Social Security Number is being requested during the application process. It is requested under the authority of Executive Order 9397 to uniquely identify your records from those of other applicants who may have the same name. As allowed by law or Presidential directive, your Social Security Number is used to seek information about you from employers, schools, banks, and others who may know you.

If the applicant enters a different number in the Confirm SSN field, then the following error message appears: *The Social Security numbers entered do not match. Please re-enter.*

Home Address (Physical Address)

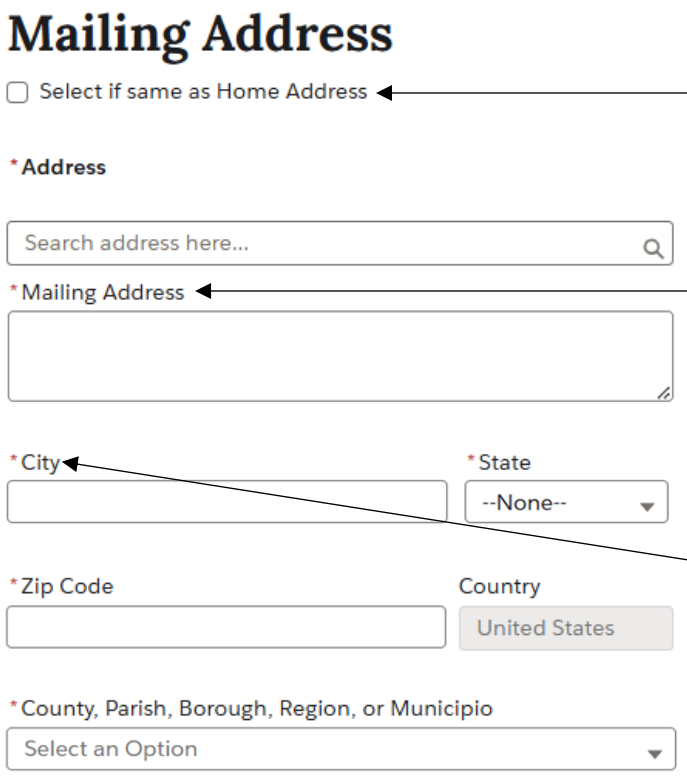
The physical address of your home helps determine your eligibility for many positions. Please ensure your address is correct, including the spelling of streets and cities. Also, please include an apartment or unit number in the Street Address field, if you have one. Please do NOT enter PO Box or other non-physical addresses. Acceptable addresses include E-911 addresses, street addresses, and Rural Free Delivery (RFD) addresses.



If the applicant enters a PO Box in the Street Address textbox, then the following error message appears: *Please enter PO Box in the upcoming Mailing Address section of this application.*

If the applicant attempts to enter more than 165 characters in the Street Address textbox, then the following error message appears: *Street Address cannot exceed 165 characters.*

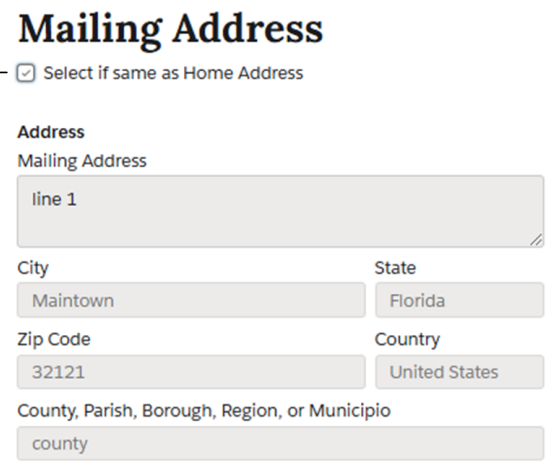
If the applicant enters numbers in the City textbox, then the following error message appears: *You entered an invalid City. Please re-enter.*



If the applicant selects the Select if same as Home Address checkbox, then the fields auto populate with the applicant's Home Address entries and the fields are greyed out.

If the applicant attempts to enter more than 165 characters in the Mailing Address textbox, then the following error message appears: *Mailing Address cannot exceed 165 characters.*

If the applicant enters numbers in the City textbox, then the following error message appears: *You entered an invalid City. Please re-enter.*



Birth and Citizenship Information

* What is your Date of Birth?
Month MM | Day DD | Year YYYY

* Confirm Date of Birth
Month MM | Day DD | Year YYYY

If the applicant enters a different date in the Confirm Date of Birth fields, then the following error message appears: *The dates entered do not match. Please re-enter.*

If the applicant enters the current year for the Date of Birth year, then the following error message appears: *You entered an invalid DOB. Please re-enter.*

If the applicant is under 18, then the following information message appears: *Based on your entry you are under 18 years of age. You currently don't qualify; however, if you turn 18 prior to the end of hiring, then your application could be considered.*

* Were you born in the United States or its territories?
- (•) Yes
- ( ) No

If the applicant selects "No", then the **In what country were you born?** drop-down menu appears.

* In what country were you born?
--None--

* In what City, State or U.S. Territory were you born?
City/Town | State --None--

OR

U.S. Territory --None--

* Are you a citizen or national of the United States?
- (•) Yes
- ( ) No

If the applicant selects "Yes", then the following warning message appears: *You have indicated you are a U.S. citizen or national. If you are NOT, then please update your answer.*

If the applicant selects "No", then the following error message appears: *You must be a citizen of the United States to be hired for a census job.*

Selective Service

If you are a male born after December 31, 1959, and are at least 18 years of age, civil service employment law (5 U.S.C. 3328) requires that you must register with the Selective Service System (SSS), unless you meet certain exemptions.

Who must register?: https://www.sss.gov/faq/#who-needs-to-register

Note: To find your Selective Service Number or obtain documentation for non-registration or exemption, please visit the Selective Service website: Selective Service System (sss.gov).

If the applicant clicks the *Selective Service System (sss.gov)* link, then the applicant will be taken to **https://www.sss.gov/verify**.

* Were you born a male after December 31, 1959?

- (•) Yes
- ( ) No

* Have you registered with the Selective Service System?

- ( ) Yes
- (•) No

If the applicant selects "Yes", then the **Please enter your Selective Service Number** textbox appears.

* Please enter your Selective Service Number

* Provide explanation or upload supporting documentation as to why you are not registered.

If the applicant attempts to enter more than 350 characters in the explanation textbox, then the following error message appears: *Explanation cannot exceed 350 characters.*

Select Document Type

Selective Service Letter

Upload Selective Service Document

Upload Files | Or drop files

Files must be less than **5MB**.
Allowed file types **doc**, **docx**, **pdf**, **jpg**, **png**.

Uploaded Files

Name	Document Type	File Type	Size	Actions

If the applicant selects "No" that they have not registered with SSS and does not provide an explanation or upload documentation, then the following error message appears: *You must provide an explanation or upload supporting documentation before continuing.*

Previous | Save & Exit | Next

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Veterans' Preference
*Do you claim Veterans' Preference?
No Preference
Yes
For more information on Veterans' Preference go to: https://www.opm.gov/fedshirevets/veteran-job-seekers/vets/.
Previous
Save & Exit
Next

Veterans' Preference

*Veterans' Preference categories

- ○ 5-point (TP). Veteran is entitled to 5-point preference.
- ○ 10-point/Disability (XP). Veteran is entitled to 10-point preference due to a service-connected disability (includes recipient of the Purple Heart who is not rated as having a compensable disability or 10 percent or more).
- ○ 10-point/Compensable (CP). A veteran who served at any time AND who has a compensable service-connected disability rating of at least 10 percent but less than 30 percent.
- ○ 10-point/Other (XP). Persons entitled to 10-point preference in this category: (1) Both the spouse and mother of the veteran occupationally disabled because of a service-connected disability; and (2) the widow/widower and mother of a deceased wartime veteran.
- ○ 10-point/Compensable/30 percent (CPS). Veteran is entitled to 10-point preference due to a compensable service-connected disability of 30 percent or more.
- ◉ Sole Survivorship Preference Eligible (SSP). No points awarded. A service member who is released or discharged from the Armed Forces after August 29, 2008, at the request of the member who is the only surviving child in a family in which the father or mother or one or more siblings (1) served in the Armed Forces; (2) was killed, died as a result of wounds, accident, disease, is in a captured or missing in action status, or is permanently 100 percent disabled or hospitalized on a continuing basis (and is not employed gainfully because of the disability or hospitalization); and (3) death, status, or disability did not result from the intentional misconduct or willful neglect of the parent or sibling and was not incurred during a period of unauthorized absence.

Note: For more information and/or to determine if you are eligible for Veterans' Preference, please visit https://www.opm.gov/fedshirevets/veteran-job-seekers/vets/. You must provide acceptable documentation of your preference or appointment eligibility.

If you claim 10-point preference or sole survivorship, you must complete a Standard Form 15 (SF-15), which is available online or at any Federal Job Performance Information Center. Submit a completed SF-15 and include the applicable documentation required (listed on page 2 of the SF-15).

If you are claiming Veterans' Preference, you must submit the necessary Veterans' Preference supporting documentation at the time of the application or you may remove your claim, submit the application, and update the application and preference claim later.

Please note that you will not receive additional points until we verify the documentation you provided.

If the applicant clicks the Standard Form 15 (SF-15) link, then the applicant will be taken to **https://www.opm.gov/forms/pdf_fill/sf15.pdf**.

Select Document Type

----Select-----

Select Document Type list options below:

- DD-214 Certification of Release or Discharge from Active Duty
- SF-15 Application for 10-point Veteran Preference
- Certification of Discharge or Release
- Official Statement/Letter of Disability
- DD Form 1300, Report of Casualty
- Retirement or separation orders
- Reserve Corps Transfer Documents
- Official Statement from Military Personnel Record Center
- Certified Death Certificate
- Certified Copy of Court Decree of Annulment

*

Upload Veteran Preference Document

Upload Files Or drop files

Your company doesn't support the following file types: .txt

Files must be less than **5MB**.

Allowed file types **doc**, **docx**, **pdf**, **jpg**, **png**.

Uploaded Files

Name	Document Type	File Type	Size	Actions
Screenshot 2024-12-31 090741	DD-1300	.png	77.00kb	
Screenshot 2024-12-31 104746	VPSD4	.png	11.00kb	

If the applicant selects a Veterans' Preference category and does not upload documentation, then the following error message appears: *You must upload supporting documentation at the time of application or remove your claim of preference. You may submit your application and update your response later.*

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Federal Employment

*Are you currently employed by a federal government agency?

- Yes
- No

*Are you a retiree receiving a federal annuity?

If you are an annuitant, your salary or annuity may be reduced upon employment. Social Security payments are **NOT** *considered a federal annuity.*

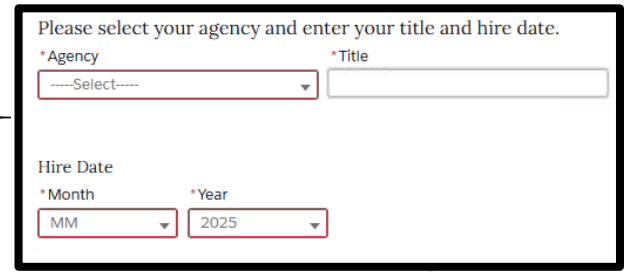
- Yes
- No

*Have you worked for the federal government or military and received a Voluntary Separation Incentive Payment (VSIP) or "Buyout" within the last 5 years?

The majority of individuals who accept re-employment with the federal government within 5 years of receiving the VSIP/Buyout amount must repay the gross amount of the separation pay prior to re-employment.

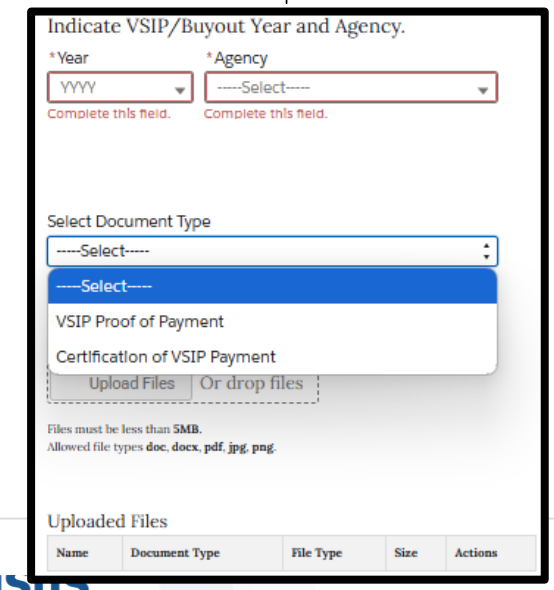
- I have NOT received VSIP/Buyout from a prior federal appointment within the past 5 years.
- I have received VSIP/Buyout from a prior federal appointment within the past 5 years. I understand that I must repay the full amount before I may be reappointed. If paid in full, you must provide proof of payment.

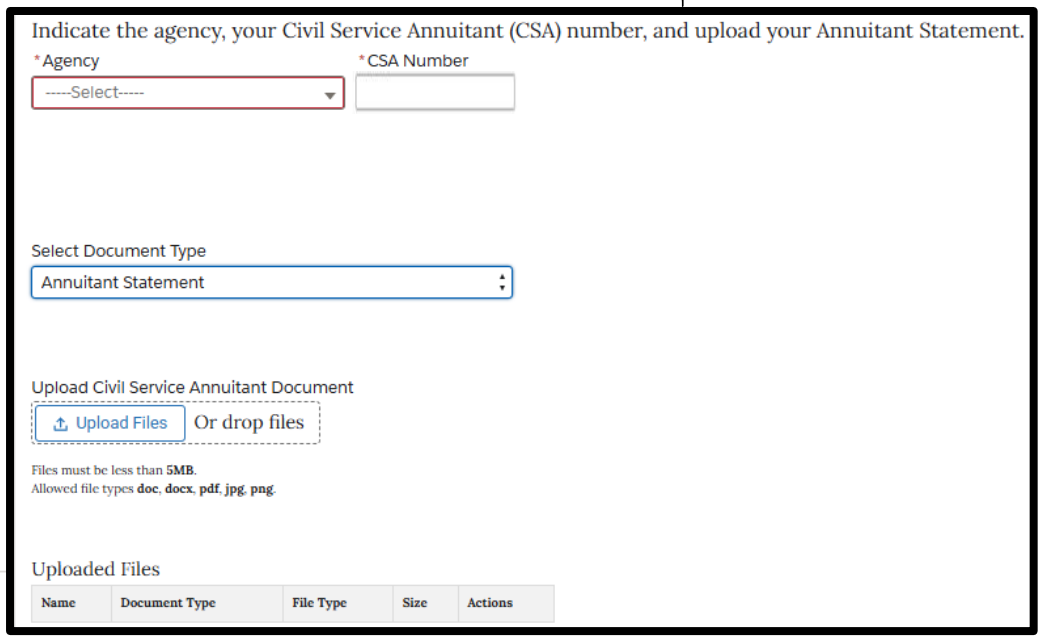
If the applicant selects "Yes" that they are currently employed by a federal government agency, then the **Please select your agency and enter your title and hire date** fields appear.



If the applicant selects "Yes" that they are a retiree receiving a federal annuity, then the **Indicate the agency, your Civil Service Annuitant (CSA) number, and upload your Annuitant Statement** fields appear.

If the applicant selects that they have received VSIP/Buyout, then the **Indicate VSIP/Buyout Year and Agency** fields appear.





Previous

Language Skills

Some Census Bureau jobs require employees to be bilingual in English and another language. The employee must be able to convince individuals who speak no English to respond to the interview by explaining the purpose. Employees will receive Census job-related training, but not language training.

*Are you fluent in any language where you can hold a conversation, record responses, and respond to questions in that language?

- (•) Yes
- ( ) No

Saved Languages:

Acholi ×

*Select the language(s) that you are fluent in, please include American Sign Language, if applicable.

Select a language

+ Add

Previous | Save & Exit | Next

Transportation

*Indicate the transportation type(s) available for your use.

If you use a personal vehicle for work purposes, you will be reimbursed for milage. If you use public transportation, you will be reimbursed for work related fares. You will not be reimbursed for rideshare services such as taxi/cab, Uber, or Lyft.

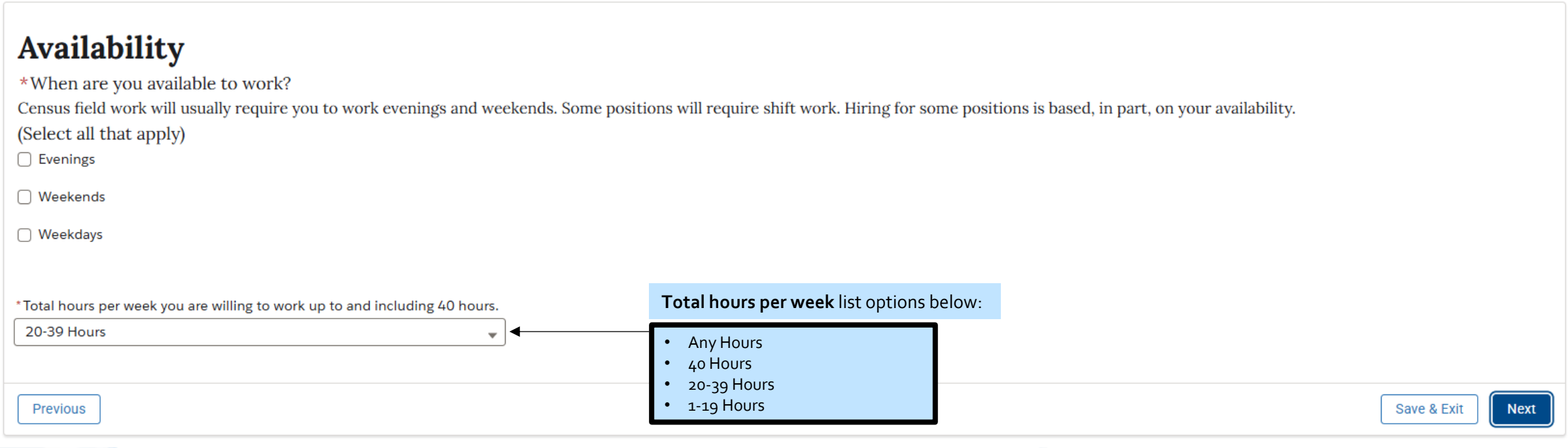
(Select all that apply)

- [x] Personal Vehicle - including any type of motorized vehicle
  For example, automobile, car, van, truck, SUV, 4WD or AWD vehicle, road legal motorcycle, road legal moped, or similar.
  - [x] Select if your Personal Vehicle is 4-Wheel Drive.
- [x] Boat (motorized and/or non-motorized)
  For example, speed boat, sailboat, fishing boat, yacht, or similar.
- [x] Off-Road Vehicles
  For example, All-Terrain Vehicle (ATV), motorized dirt bike, quad bikes, quads, 4-wheeler, 4-track, 3-wheeler, or similar.
- [x] Airplane or Helicopter
- [x] Snowmobile, Snowmachine, Dog Sled, or similar
- [ ] None of the above

Previous | Save & Exit | Next

If the applicant hovers over the information icon, then the below message appears:

> The majority of field jobs require employees to travel to an assignment area and travel door to door within the assignment area. In densely populated areas employees may be able to get to their assignment areas using public transportation. In less densely populated areas where housing units may be more spread out, employees will need a vehicle to travel from housing unit to housing unit.



Total hours per week list options below:

- Any Hours
- 40 Hours
- 20-39 Hours
- 1-19 Hours

Training and Outreach

*Have you conducted in-person training in a classroom environment?

- ◯ Yes
- ◯ No

*Have you conducted live virtual training using online meeting software or virtual training tools? e.g. Zoom, Cisco WebEx, Microsoft Teams, GoTo Meeting, etc.

- ◯ Yes
- ◯ No

*Do you have the following work or volunteer experience?
(Select all that apply)

- ☐ Working at community outreach events
- ☐ Recruiting at hiring events, such as job fairs
- ☐ Providing services or outreach to people experiencing homelessness
- ☐ Working with tribal governments, tribal leaders, or on tribal lands
- ☐ None of the above

If the applicant hovers over the information icon, then the below message appears:

Community outreach involves providing services to a group of people who may not otherwise have access to those services. For example, working or volunteering at a food bank or pantry, soup kitchens etc. Working or volunteering at collection drives for people in need, working or volunteering at senior citizen or children community centers.

Previous | Save & Exit | Next

Signature

You must Electronically Sign this application.

Read the following statements carefully.

* Acknowledge your agreement by checking the checkbox next to each before you sign.

☐ I certify that, to the best of my knowledge and belief, all of the responses provided in this questionnaire are true, correct, complete, and made in good faith. I understand that a false or fraudulent answer to any question or item on any part of this questionnaire 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 by law or Presidential order. I consent to the release of information about my ability and fitness for Federal 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 certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith.

Applicants must acknowledge both statements above in order to submit their application.

Signature | Date and Time

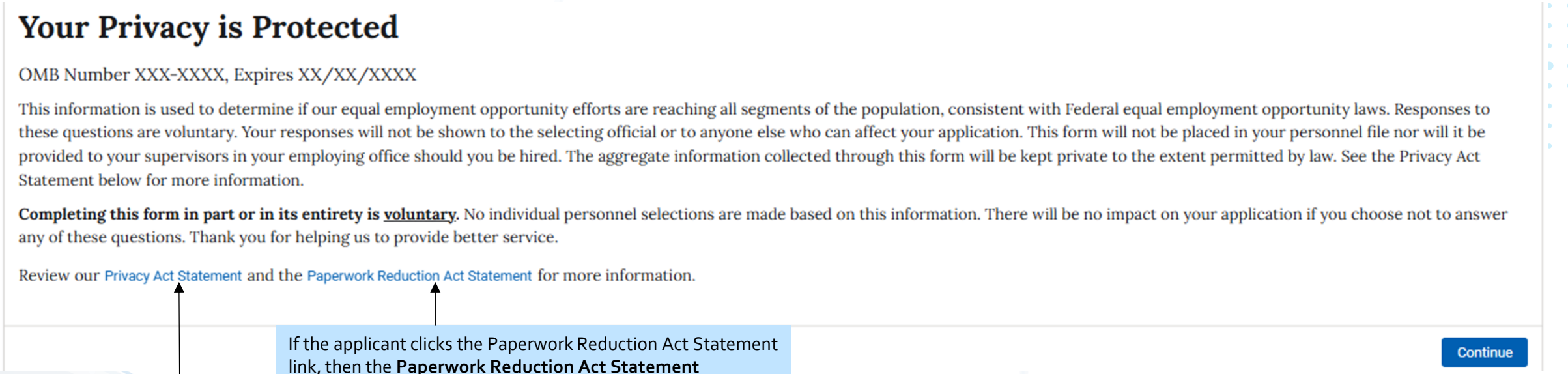
Previous | Next

If the applicant does not check the checkboxes, then the following error appears: *Applicants must acknowledge both statements above in order to submit their application.*

When the applicant checks BOTH checkboxes, then the **Signature** textbox populates with the applicant's name.

When the applicant checks BOTH checkboxes, then the **Date and Time** textboxes populates with the current date and time.

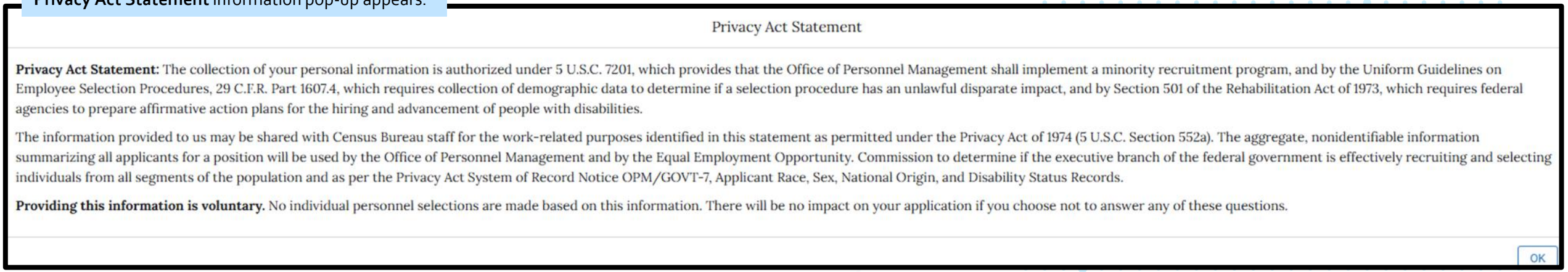
Supplemental Voluntary Applicant Information



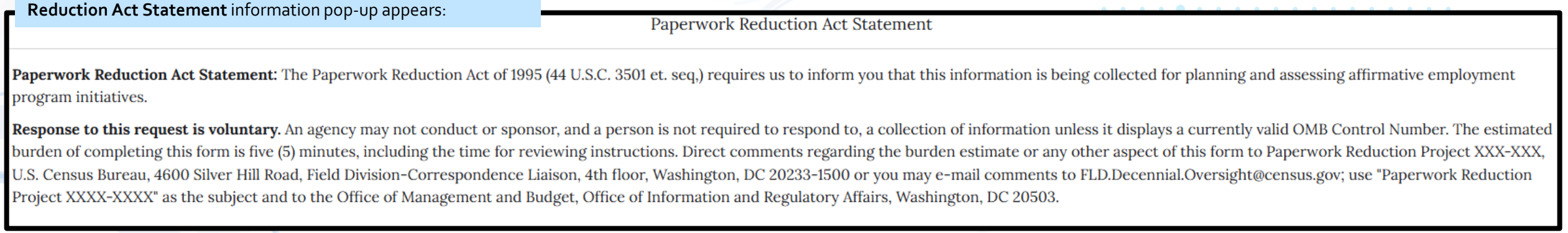
If the applicant clicks the Paperwork Reduction Act Statement link, then the **Paperwork Reduction Act Statement** information pop-up on the following slide appears.

If the applicant clicks the Privacy Act Statement link, then the **Privacy Act Statement** information pop-up on the following slide appears.

If the applicant clicks the Privacy Act Statement link on the Your Privacy is Protected screen, the following **Privacy Act Statement** information pop-up appears:



If the applicant clicks the Paperwork Reduction Act Statement link on the Your Privacy is Protected screen, the following **Paperwork Reduction Act Statement** information pop-up appears:



Referral

Do you have a referral code?

- Yes
- No

If the applicant selects "Yes", the **Enter your referral code** textbox appears.

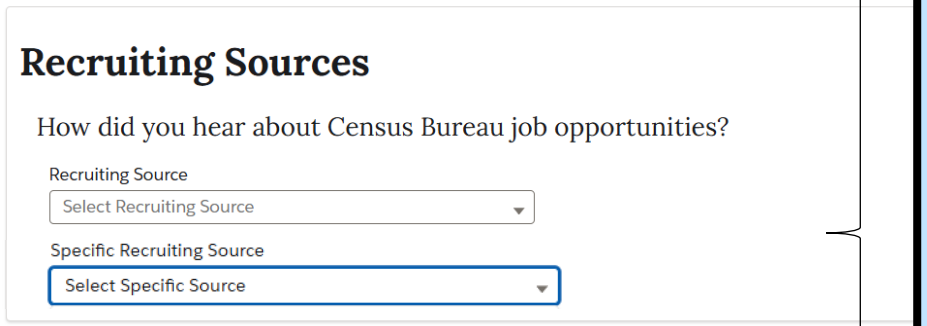
Enter your referral code:

123123123

If the applicant hovers over the information icon, then the below message appears:

You may have been given a referral code by an organization or person that told you about Census jobs, or you may have seen a referral code in an advertisement for Census jobs. The code contains letters and/or numbers.

United States® Census Bureau



Recruiting Source categories below in bold and annotated with *.
Specific Recruiting Source sub-categories below, bulleted beneath associated Recruiting Source.

* **Referred by a Person or Through Social Media**
- Social Media Ad/Post
- Word-of-mouth/Family/Co-Worker/Other Person
- Census Employee/Recruiter

* **Electronic Employment Source or Service (App/Internet/Online)**
- Online Job Board/Online Employment Resource
- Search Engine/Searched Online

* **In-Person Employment Source or Service**
- Employment Office/Job Service Center
- Job Fair/Career Fair/Employment Fair

* **Entertainment or Media Source**
- Online News Source
- Mobile App Advertisement – Ads in games, videos, or other apps
- Print Newspaper/Magazine/Shopper or Other Print (Ad/Article)
- Radio/Audio Streaming Service/Podcast (Ad/News/Other)
- TV/Video Streaming Service (Ad/News/Other)

* **Organization/Public Official/Government (Include Electronic Messages/Postings from These Sources)**
- Faith-Based/Religious Organization or Official
- Educational Organization or Library or Official – School/College/University/Library/Other Educational Organization
- Government Organization or Official-Federal/State/Tribal/Local Government Organization
- Business Organization – Small Business/Sole Proprietorship, Corporations, LLCs, Partnerships
- Community-Based Organization or Official – Non-Government Organization (often non-profit)

* **Transportation/Outdoor/Out-of-Home Advertisement**
- Public Transportation/Mass Transit/Subway/Bus/Taxi/Airport/Rideshare or Similar Advertisement
- Other Public Location – Mall/Gas or Charging Station/Movie Theatre/Other
- Billboard/Electronic Billboard

* **Census Bureau Promotions or Events**
- Census Mailing/Postcard Sent to your Home
- Flyer/Card/Lawn Sign/Brochure or Similar
- Event Booth/Representative at Event – Conference/Festival/Market/Expo/Fair/Show/Parade/Sporting Event or Similar
- Other Communications from Census Bureau – Email/Phone/Text/Other

Demographics

Sex

- ○ Male
- ○ Female

What is your race and/or ethnicity?
(Select all that apply)

- ☐ American Indian or Alaska Native
  For example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.
- ☐ Asian
  For example, Chinese, Asian Indian, Filipino, Vietnamese, Korean, Japanese, etc.
- ☐ Black or African American
  For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.
- ☐ Hispanic or Latino
  For example, Mexican, Puerto Rican, Salvadoran, Cuban, Dominican, Guatemalan, etc.
- ☐ Middle Eastern or North African
  For example, Lebanese, Iranian, Egyptian, Syrian, Iraqi, Israeli, etc.
- ☐ Native Hawaiian or Pacific Islander
  For example, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese, etc.
- ☐ White
  For example, English, German, Irish, Italian, Polish, Scottish, etc.

Education

Select highest education level.

- ○ No high school
- ○ Some high school - Did not graduate
- ○ High school diploma/GED
- ○ Technical degree/Trade school degree or certificate
- ○ Some college - Did not graduate
- ○ Associate's degree
- ○ Bachelor's degree
- ○ Master's degree
- ○ Doctoral degree

Disability/Serious Health Conditions

The next questions address disability and serious health conditions. Your responses will ensure that our outreach and recruitment policies are reaching a wide range of individuals with physical or mental conditions. Consider your answers without the use of medication and aids (except corrective lenses) or the help of another person.

Do you have any of the following?
(Select all that apply)

- [ ] Deaf or serious difficulty hearing
- [ ] Blind or serious difficulty seeing even with corrective lenses
- [ ] Missing extremities: (e.g. arm, leg, hand, and/or foot)
- [ ] Paralysis: Partial or complete paralysis (any cause)
- [ ] Significant Disfigurement: (e.g. severe disfigurements caused by burns, wounds, accidents, or congenital disorders)
- [ ] Significant Mobility Impairment: (e.g. uses a wheelchair, scooter, walker, leg brace(s) and/or other supports)
- [ ] Significant Psychiatric Disorder: (e.g. bipolar disorder, schizophrenia, PTSD, or major depression)
- [ ] Intellectual Disability
- [ ] Developmental Disability: (e.g. cerebral palsy or autism spectrum disorder)
- [ ] Traumatic Brain Injury
- [ ] Dwarfism
- [ ] Epilepsy or Other Seizure Disorder
- [ ] Other Disability or Serious Health Condition (e.g. diabetes, cancer, cardiovascular disease, anxiety disorder, or HIV infection, a learning disability, a speech impairment, or a hearing impairment)

- [ ] I do NOT have a disability or serious health condition
- [ ] I have a disability or serious health condition, but it is not listed above
- [ ] I do NOT wish to identify my disability or serious health conditions

If the applicant checks the *Other Disability or Serious Health Condition* checkbox, then the applicant will be taken to the **Other Disability or Serious Health Conditions (Optional)** screen on the following slide.

If the applicant checked the Other Disability or Serious Health Condition checkbox on the Disability/Serious Health Conditions screen, then the applicant will be taken to this screen.

Other Disability or Serious Health Conditions (Optional)

You indicated that you have a disability or a serious health condition. If you are willing, please select any of the conditions listed below that apply to you. Your responses will not be shown to the selecting official or to anyone else who can affect your application. All responses will remain private to the extent permitted by law.

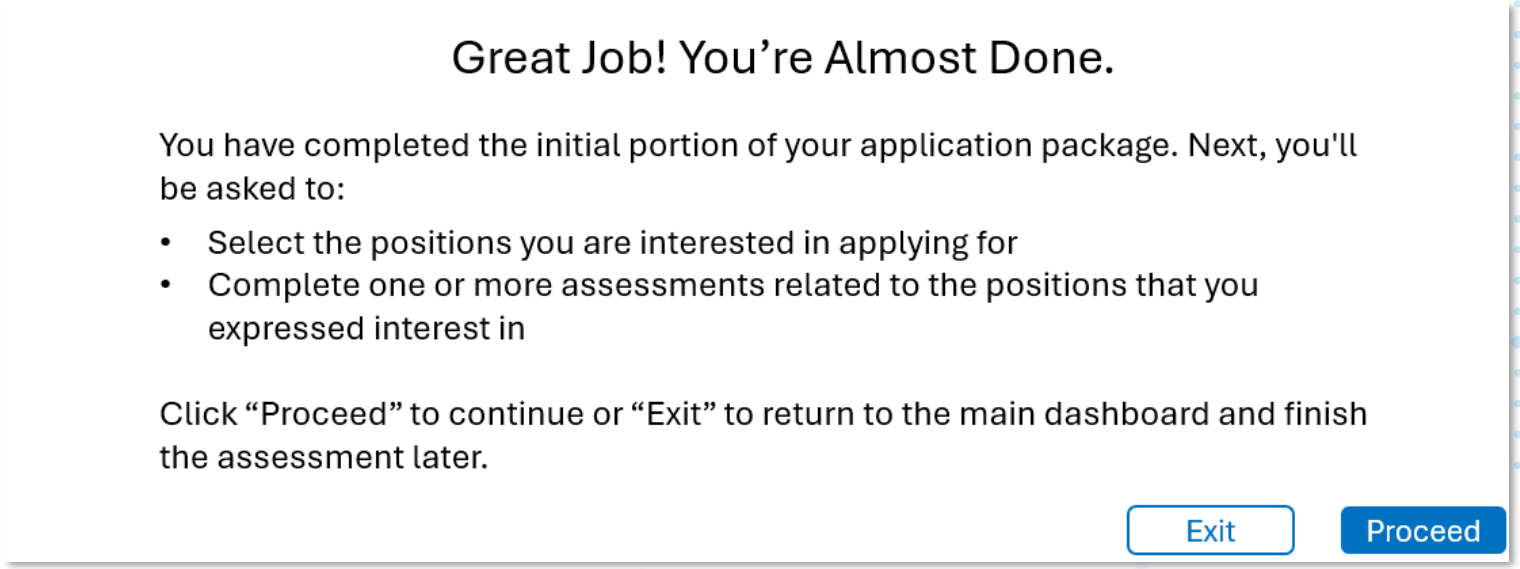
(Select all that apply)

- [ ] Alcoholism
- [ ] Cancer
- [ ] Cardiovascular or heart disease
- [ ] Crohn's disease, irritable bowel syndrome, or other gastrointestinal impairment
- [ ] Depression, anxiety disorder, or other psychological disorder
- [ ] Diabetes or other metabolic disease
- [ ] Difficulty seeing even when wearing corrective lenses
- [ ] Hearing impairment
- [ ] History of drug addiction (but not currently using illegal drugs)
- [ ] HIV Infection/AIDS or other immune disorder
- [ ] Kidney dysfunction: (e.g. requires dialysis)
- [ ] Attention deficit/hyperactivity disorder (ADD/ADHD)
- [ ] Liver disease: (e.g. hepatitis or cirrhosis)
- [ ] Lupus, fibromyalgia, rheumatoid arthritis, or other autoimmune disorder
- [ ] Morbid obesity

List continued below:

- [ ] Nervous system disorder: (e.g. migraine headaches, Parkinson's disease, or multiple sclerosis)
- [ ] Non-paralytic orthopedic impairments: (e.g. chronic pain, stiffness, weakness in bones or joints, or some loss of ability to use parts of the body)
- [ ] Orthopedic impairments or osteo-arthritis
- [ ] Pulmonary or respiratory impairment: (e.g. asthma, chronic bronchitis, or tuberculosis)
- [ ] Sickle cell anemia, hemophilia, or other blood disease
- [ ] Speech impairment
- [ ] Spinal abnormalities (e.g. spina bifida or scoliosis)
- [ ] Thyroid dysfunction or other endocrine disorder
- [ ] Other. Please identify the disability/serious health condition, if willing:

- [ ] I do NOT wish to specify any condition


Great Job! You’re Almost Done.
You have completed the initial portion of your application package. Next, you'll be asked to:
• Select the positions you are interested in applying for
• Complete one or more assessments related to the positions that you expressed interest in
Click “Proceed” to continue or “Exit” to return to the main dashboard and finish the assessment later.
Exit
Proceed