emp App 4-20-2020

LCCS Application

Read the instructions before you complete this application. Type or print clearly in dark ink.

Form Approved OMB No. 3206-0012

9-	ENERAL INFORMATION												
1	What kind of job are you applying for? Give title and	announcement no. (i	if any)										
2	Social Security Number					3 Sex							
4	Birth date (Month, Day, Year)	Birth date (Month, Day, Year)			Male Female 5 Birthplace (City and State or Country)								
6	Name (Last, First, Middle)												
	Mailing address (include apartment number, if any)												
	City	State						ZIP C	ode				
7	Other names ever used (e.g., maiden name, nickname	me, etc.)											
8	Home Phone	9 Work Phone											
•	Area Code Number	Area Code	Numb	oer	Extension								
•													
AV 11	AILABILITY When can you start work? 12 What is the lowes	nd job title? TO It pay you will accept? (for jobs which pay less the	You will han you			Were you o	discharged	from the military servic		E (Cont.)			
	indicate.) Pay \$ Per OR Grade						rge Review	Board, answer "YES".	"honorable" or "general" If you received a clemency				
12	In what geographic area(s) are you willing to work?		,,,,,,			If "NO ", provide below the date and type of discharge yo							
13					_	(Month, Da			Type of Discharge				
14	Are you willing to work:			NO	20	,			oranch for all active duty military				
	A. 40 hours per week (full-time)?				1	Fro	om	То	Branch of Servic	<u>e</u>			
	B. 25-32 hours per week (part-time)?		-		-								
	C. 17-24 hours per week (part-time)? D. 16 or fewer hours per week (part-time)?				21	If all your accampaign b	ctive duty adges or	was after October 14 expeditionary medal	4, 1976, list the full names and da s you received or were entitled to	ates of all receive.			
	E. An intermittent job (on call/seasonal)?				┪		-						
	F. Weekends, shifts, or rotating shifts?				1								
15	Are you willing to take a temporary job lasting: A. 5 to 12 months (sometimes longer)?				22	Read the i	nstruction have deter	ns that came with t	his form before completing this y for veteran preference from the to your veteran preference claim.	s item.			
	B. 1 to 4 months?				1 _	_			to your veteran preference claim.				
	C. Less than 1 month?				1 ⊢	-	FERENCE						
16	Are you willing to travel away from home for: A. 1 to 5 nights each month?				5-POINT PREFERENCE - You must show proof when you are hired. 10-POINT PREFERENCE - If you claim 10-point preference, place an "X" in the								
	B. 6 to 10 nights each month?		1		┨	box belo	w next to	the basis for your o	aim. To receive 10-point prefere				
	C. 11 or more nights each month?					must also complete a Standard Form 15, Application for 10-Point Veteran Preference, which is available from any Federal Job Information Center. ATTACH							
MII	LITARY SERVICE AND VETERAN	PREFERENCE			Í	_			ED PROOF TO THIS APPLICATION.	·			
	dave you saxed in the ill rite Retains Military to answer "NO", If " NO ", go to item 22.		YES	NO	Non-compensably disabled or Purple Heart recipient. Compensably disabled, less than 30 percent.								
18	IPICLY OU OF WILLYOU SELICE AT OR ABOVE THE RANK OF MAJ	or or			╡╞	-1			eased or disabled veteran.				
		╛┕	Compens	aniy uisal	oled, 30 percent or n	nord.							

RK EXPERIENCE If May we ask your present emp	lover about vo	ur character, qu	alifications, and work reco	rd? A "NO" will not affect of	our review of your	······ Cont	YES			
ualifications. If you answer READ WORK EXPERIENCE Describe your current or most re	"NO" and we	RUCTIONS BEFORM A and work back	your present employer b ORE YOU BEGIN. twards, describing	efore we_can offer you a INCLUDE MILITA as you would for a	job, we will contact ARY SERVICE You's a non-military job, includ	hould complete all parts of the	. Describe each			
each job you held during the past 10 years. If you were unemployed for longer than 3 months within the past 10 years, list the dates and your address(es) in an experience block. You may sum up in one block work that you did more than 10 years ago. But, if that work is related to the type of job you are applying for, describe each related job in a			major change of duties or responsibilities in a separate experience block. IF YOU NEED MORE SPACE TO DESCRIBE A JOB Use sheets of paper the same size this page (be sure to include all information we ask for in A and B below). On each sheet show your name, Social Security Number, and the announcement number or job							
INCLUDE VOLUNTEER WORK like the job you are applying for you would for a paying job. You	aparate block. NCLUDE VOLUNTEER WORK. (non-paid work) If the work (or a part of the work) is ke the job you are applying for, complete all parts of the experience block just as pu would for a paying job. You may receive credit for work experience with religious.			title. IF YOU NEED MORE EXPERIENCE BLOCKS, use the SF 171-A or a sheet of paper. IF YOU NEED TO UPDATE (ADD MORE RECENT JOBS), use the SF 172 or a sheet of						
community, welfare, service, and other organizations. Name and address of employer's organization (include ZIP C			Code, if known)	paper as describ Datesemployed(givernonth,		Average number of hours per week	Number of employee you supervise			
				Salary or earnings Starting \$ Ending \$	per per	Your reason for lea	ving			
Your immediate supervisor Name	Area Code	Telephone No.	Exact title of your job	Linding	If Federal employ	I yment <i>(civilian or military)</i> moted in this job, the da				
						ForAgencyUse	(skillcodes,etc.)			
lame and address of employ	er's organizati	on (include ZIP	Code, if known)	Datesemployed/givernonth,		J J	, ,			
lame and address of employ	er's organizati	on (include ZIP	Code, if known)	From: Salary or earnings Starting \$	To:	Average number of	Number of employee you supervised			
our immediate supervisor		on <i>(include ZIP</i>	Code, if known) Exact title of your job	From: Salary or earnings	To: per per If Federal employ	Average number of hours per week	Number of employee you supervised ving			
our immediate supervisor dame	Area Code	Telephone No.	Exact title of your job	From: Salary or earnings Starting \$ Ending \$	per per lf Federal employ rank, and, if pro	Average number of hours per week Your reason for leaver the second of t	Number of employee you supervised ving i) list series, grade of ate of your last promed.			
our immediate supervisor dame Description of work: Describ	Area Code	Telephone No.	Exact title of your job	From: Salary or earnings Starting \$ Ending \$	per per lf Federal employ rank, and, if pro	Average number of hours per week Your reason for leaver the second of t	Number of employee you supervised ving i) list series, grade of ate of your last promed. If you			
/our immediate supervisor vame Description of work: Describi	Area Code	Telephone No.	Exact title of your job	From: Salary or earnings Starting \$ Ending \$	per per lf Federal employ rank, and, if pro	Average number of hours per week Your reason for leaver the second of t	Number of employee you supervised ving i) list series, grade or ate of your last promed. If you			
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Name and address of employ Your immediate supervisor Name Description of work: Describe describe more than one type	Area Code	Telephone No.	Exact title of your job	From: Salary or earnings Starting \$ Ending \$	per per lf Federal employ rank, and, if pro	Average number of hours per week Your reason for leaver the second of t	Number of employee you supervised ving i) list series, grade or ate of your last promed. If you			
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-ATTACH ANY ADDITIONAL FORMS AND SHEETS HERE

围	DUCATION														
25	Did you graduate from high school? If you have a GED high schequivalency or will graduate within the next nine months, answe	hool		26 ^V	Vrite the n	ame ar	nd locati	on (city and	state) of	the last	high scho	ol you at	tended or		
_ •	equivalency of will graduate within the next fille months, answe		- W	vnere you	obtaine	a your (GED high sch	iooi equ	ivalency	y.					
	YES If "YES", give month and year graduated														
	or received GED equivalency:		2	27 ¦	Have you e college or g	ever atte	ended e	YES		f "YES	", continue	with 28.			
	NO If "NO", give the highest grade you completed:	_		s	chool?	, aaaat	-	NO		f "NO " ,	go to 31.				
28	NAME AND LOCATION (city, state and ZIP Code) OF COLLECT uate within nine months, give the month and year you expect	E OR UN	NIVERSIT)	Y. If yo	ou expect	to grad	-			AND YEAR	R NUMBER C		TYPE O DEGREE	A	NTH ND
	Name	i to receiv	e your deg	gree.	City		State	ZIP Code	From	То	Semester	Quarter	(e.g. B.A., M.A.)		AR OF GREE
•			<u> </u>			-							1		
	2)		Ī				ı								
	2)													┿	
	3)		1			ı	I								
20	,	NUMB	ER OF CRE	EDIT	30		CI	HIEF GRADU	IATE CI	ID IECT	-0		NUMBER	R OF CRE	-DIT
29	Show major on the first line		S COMPLE		30			Show major o			3		HOURS		
	4)	Semes	ster Qua	rter	4)								Semeste	r Qua	arter
į.	1)	_			1)	_								┿	
	2)	 			2)									┿	
	3)				3)										
.	If you have completed any othercoursesortrainingrelatedtoth			eapply	yingfor (tr MONTH A		3		ces, bus	iness) g	jive inform	ation bel	OW.	TRAIN	MNG
	NAME AND LOCATION (city, state and ZIP Co	ae) OF S	CHOOL		ATTEN		CLASS ROOM			SUB.	JECT(S)			COMPL	
	-				From	To	HOUR	S		0050	,,			YES	NO
	School Name														
	1)	01.1. 7	ID O . I											\sqcup	
	City	State Z	IP Code												
	70.1														
	School Name														
	2)	0 7	10.0											\sqcup	
	City	State ZIF													
SP	PECIAL SKILLS, ACCOMPLISHMENTS AN	D AW	ARDS												
32	Give the title and year of any honors, awards or fellowships yo	ou have re	ceived. L	ist yo	ur special	qualifi	cations,	, skills or ac	complis	hments	that may	help you	ı get a jo	b.	
-	Some examples are: skills with computers or other machine in professional or scientific societies; patents or inventions; e		mportant p	ublica	ations (do	not su	ubmit co	ppies); public	speaki	ng and	writing ex	perience	e; membe	rship	
	in professional of scientific societies, paterns of inventions, e														
~~	How many words per 134 List job-related licenses or cell	rtificatos	that you be	21/0 0	uch oc: re	aistoro	d nurco	· lawyar: radi	io oporo	tor: driv	or's: nilot's	· oto			
33	minute can you:			ave, s	l .	.g/3/6/6	DATE O	F LATEST L	ICENSE	ioi, uiive	ει 3, μποι 3, 	STATE	OR OTH	ER	
	TYPE? TAKÉ DICTATION?			E			OR CERTIFICA		ATE		I	LICENSING AGEN		1CY	
	Agenciesmaytestyour 1)														
	skillsbeforehiringyou. 2)														
35	Do you speak or read a language other than English (include signal)	gn			YES			each languag	je and p	lace an	"X" in eacl	h columr	n that appl	ies to yo	ou.
	language)? Applicantsforjobsthatrequirealanguageothertha Englishmaybegivenaninterviewconductedsolelyinthatlangu		a.		NO	If "NC	If " NO ", go to 36 .								
	LANGUAGE(S)		CAN PR	REPAR	RE AND	CAN	CDEAK AN	ID UNDERSTANI	CAN TRANSI		ATE ABTICLES		N READ		
					URES						LATEARTICLES		FOR OV		
	4)		Fluently	/ V	Vith Difficult	y FI	luently	Passably	Into	English	From Eng	lish	Easily	With Dif	ficulty
	1)					1									
	2)														
RE	FERENCES														
36	List three people who are not related to you and are not supervi	isors you	listed unde	er 24 v	vho know	your o	qualifica	tions and fit	iness fo	r the k	ind of job	for wh	ich you a	re appl	ying.
	At least one should know you well on a personal basis. TELEPHO				ED(S)	DDEQENIT DI IQINIFI		ESS OR HOME ADDRES		DDEES	RESS				
	FULL NAME OF REFERENCE		clude Area					IT BUSINESS OR HOME (Number, street and city)			ADDKE98		STATE	ZIP COD	Æ
_	1)									_					
	2)														
-	2)	-										_			
	3)														
	-,														

ВА	CKG	ROUNI	O INFORMATION You must answer ea	ach question in this sec	tion b	efore we can process your app	olication		
	Are y	ou a citizer	n of the United States? (In most cases you must be a	U.S. citizen to be hired. You	will be r	required to submit proof of	77.7.7.	YES	NO
	identit	ty and citize	enship at the time you are hired.) If "NO", give the co	untry or countries you are a c	itizen of	·			
pro 2) juv coi ma 38 39 40 41 42 43	vide y vide y vide y vide enile c envictior st case y be g Durin leave Have punisi impris Have Are y c During incluc	our explaid olation of late out or under the est you can be used to be used t	tant that you give complete and truthful answer nation(s) in Item 45. Include convictions resulting aw committed before your 16th birthday; 3) any violations are avoided as a Youth Offender law; 4) any conviction set aside cord was expunged under Federal or State law. We want to still be considered for Federal jobs. However, if you not hiring you, for firing you after you begin work or for the convicted of, or forfeited collateral for anyfelonywok apprisonment of longer than one year, except for violation to the convicted of, or forfeited collateral for anyfelonywok are convicted of, or forfeited collateral, been convicted, been seen convicted by a military court-martial? If no military seen convicted by a military court-martial? If no military seen convicted by a military court-martial?	from a plea of nolo contend- ion of law committed before y- under the Federal Youth Corr will consider the date, facts, a fail to tell the truth or fail for criminal prosecution (18 US u quitafterbeingtoldthatyouwould ation? (Generally, a felony is ditions called misdemeanors un explosivesviolation?	ere (no our 18th rections nd circu to list a SC 1000 libefired, defined a der Stati	contest). Omit: 1) traffic fines of \$100 in birthday, if finally decided in Act or similar State law; 5) any imstances of each event you list. In all relevant events or circumstances, to 1). For did you as any violation of law the law which are punishable by the law which are punisha		YES	NO
44	Are you	ou delinque to the U.S	nton any Federal debt? (Include delinquencies arising . Government plus defaults on Federally guaranteed o	ı from Federal taxes, loans, ov r insured loans such as a stud	verpaym lent and	nent of benefits, and other I home mortgage loans.)			
45	NC	f "YES" in: 38 - Explain for each job the problem(s) and your reason(s) for leaving. Give the employer's name and address. 39through43 - Explain each violation. Give place of occurrence and name/address of police or court involved. 44 - Explain the type, length and amount of the delinquency or default, and steps you are taking to correct errors or repay the debt. identification number associated with the debt and the address of the Federal agency involved. NOTE: If you need more space, use a sheet of paper, and include the item number.							
	Item No.	Date (Mo/Yr.)	Explanation			MailingAddress			
					Name	of Employer, Police, Court, or Federal	Agency		
					City	State ZIP	Code		
					Oity		Codo		
					Name	of Employer, Police, Court, or Federal	Agency		
					City State ZIP Code				
46	Do vo	nu receive	or have you ever applied for retirement hav pension	or other nay based on milita	rv Fede	eral civilian, or District of		YES	NO
40	Colun	nbia Gove	or have you ever applied for retirement pay, pension ment service?	, or other pay based on mine	y, . ou.	oral orvinari, or bloater or			
47	Do ar wife; s	ny of your i	relatives work for the United States Government or th ter; brother; sister; uncle; aunt; first cousin; nephew; r	ne United States Armed Force niece; father-in-law; mother-in;	s? Inclu law; so	ide: father; mother; husband; n-in-law; daughter-in-law;			
			<i>ister-in-law; stepfather; stepmother; stepson; stepdau</i> e details below. If you need more space, use a sh		half bro	ther; and half sister			
		, , , , , , , ,	Name	Relationship		Department, Agency or Br	anchofAr	medF	orces
SIC	ANE	TURE. C	CERTIFICATION, AND RELEASE OF I	NFORMATION					
Y)U	MUST	SIGN THIS APPLICATION.	Read the following	caref	ully before you sign.			
	byIfluIcinc	you are a n gible for For nderstand onsentto the dividuals a	ment on any part of your application may be grounds for prisonment (U.S. Code, title 18, section 1001). The prisonment (U.S. Code, title 18, section 1001). The prisonment (U.S. Code, title 18, section 1001). The prison after December 31, 1959 you must be register ederal employment. You will be required to certify as to that any information I give may be investigated as allower release of information about my ability and fitness of and organizations, to investigators, personnel staffing spector to the best of my knowledge and belief, all of my states.	red with the Selective Service So your status at the time of appwed by law or Presidential order Federal employment by employecialists, and other authorized	System of ointmender. Solvers, solvers	or have a valid exemption in order to be t. chools, law enforcement agencies and oth ees of the Federal Government.			
48	SIGN	ATURE(Sign	eachapplicationindarkink)		4	9 DATESIGNED(Month,day,year)			