U.S. Department of State

OMB APPROVAL NO. 1405-0189
EXPIRES: 05/31/2019
ESTIMATED BURDEN: 1 Hour

EMPLOYMENT APPLICATION FOR LOCALLY EMPLOYED STAFF OR FAMILY MEMBER

POSITION

Vacancy Announcement Number	Position Title

SECTION 1: PERSONAL INFORMATION TO BE COMPLETED BY ALL APPLICANTS

Name (Last, First or Given Name)

Other Names Used

Address

Email	Telephone Number

Does your relative work in this Embassy or Consulate? If yes, tell us their name and the section where they work.

Are you able to legally work in this country? ☐ Yes ☐ No
(U.S. Government does not sponsor work visas unless specified on the Vacancy Announcement.)

If this job includes driving a U.S. Government vehicle, do you have a current and valid driver's license? ☐ Yes ☐ No

SECTION 2: EDUCATION

	Dates Attended *(mm-yyyy)*	Did you graduate?		
High School/Secondary Education (Name, City)	From To	☐ Yes ☐ No		
Trade/Technical (Name, City)	From To	☐ Yes ☐ No	Certificate/Diploma	Major Subject
Undergraduate/Bachelor's Degree (Name, City)	From To	☐ Yes ☐ No	Degree/Diploma	Major Subject
Graduate Degree (Name, City)	From To	☐ Yes ☐ No	Degree/Diploma	Major Subject

SECTION 3: LANGUAGES

Languages

1 **Basic** - Examples: Basic greetings, phrases, numbers and signs.
2 **Limited** - Examples: 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

Language	Speaking (Provide level)	Reading (Provide level)	Writing (Provide level)

SECTION 4: WORK EXPERIENCE

Paid and Voluntary - Please begin by listing your most current work experience and go back 10 years (or longer, if relevant for the job.)

Job Title ☐ Full Time ☐ Part Time	From *(mm-yyyy)*	To *(mm-yyyy)*	Yearly Salary (Local currency)
Employer Name, Address and Phone Number			
Supervisory Responsibilities? ☐ Yes ☐ No	Supervisor Name		
Main Duties and Responsibilities			
Reason for leaving			

Job Title ☐ Full Time ☐ Part Time	From *(mm-yyyy)*	To *(mm-yyyy)*	Yearly Salary (Local currency)
Employer Name, Address and Phone Number			
Supervisory Responsibilities? ☐ Yes ☐ No	Supervisor Name		
Main Duties and Responsibilities			
Reason for leaving			

Job Title ☐ Full Time ☐ Part Time	From *(mm-yyyy)*	To *(mm-yyyy)*	Yearly Salary (Local currency)
Employer Name, Address and Phone Number			
Supervisory Responsibilities? ☐ Yes ☐ No	Supervisor Name		
Main Duties and Responsibilities			
Reason for leaving			

SECTION 4: WORK EXPERIENCE (Continued)

Job Title ☐ Full Time ☐ Part Time	From *(mm-yyyy)*	To *(mm-yyyy)*	Yearly Salary (Local currency)

Employer Name, Address and Phone Number

Supervisory Responsibilities? ☐ Yes ☐ No	Supervisor Name

Main Duties and Responsibilities

Reason for leaving

SECTION 5: CITIZENSHIP

Are you a U.S. citizen listed on the travel orders or approved OF-126 (or other agency equivalent) of a direct hire FS, CS or uniformed service member assigned (not TDY) to this U.S. Mission and under Chief of Mission authority, or to an office of the American Institute in Taiwan?
If no, proceed to Section 6. ☐ Yes ☐ No
If yes, select all that apply:

☐ 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: DECLARATION

☐ I certify that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete, and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me, or for separation/dismissal after I begin work, and may be punishable by fine or imprisonment according to this country's law or U.S. law. I understand that any information I voluntarily provide on or attached to this 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.

BURDEN 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 OPPORTUNITY EMPLOYER

The U.S. Mission provides equal opportunity and fair and equitable treatment in employment to all people without regard to race, color, religion, sex, national origin, age, disability, political affiliation, marital status, protected genetic information, or sexual orientation.

The EEO complaint procedure is not available to individuals who believe they have been denied equal opportunity based upon marital status or political affiliation. Individuals with such complaints should avail themselves of the appropriate grievance procedures, remedies for prohibited personnel practices, and/or courts for relief.