



**APPLICATION FOR EMPLOYMENT AS A
LOCALLY EMPLOYED STAFF OR FAMILY MEMBER**

*(This application is for positions recruited by the U. S. Mission under the
Office of Overseas Employment's Interagency Local Employment Recruitment Policy)*

POSITION		
1. Position Title	2. Grade	
3. Vacancy Announcement Number	4. Date Available for Work <i>(mm-dd-yyyy)</i>	
PERSONAL INFORMATION		
5. Last Name(s)/Surnames	First Name	Middle Name
6. Other Names Used		
7. Current Address	8. Phone Numbers	
	Day _____	
	Evening _____	
	Mobile _____	
9. E-mail Address		
10. Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
11. Do you have permanent U.S. Resident status <i>(green card)</i> ? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, provide number. _____		
12a. U.S. Social Security Number <i>(for U.S. Citizens/Permanent U.S. Residents)</i> _____		
and/or		
12b. Country Identification Number _____		
13. Are you legally eligible to work in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, Mission HR may require verification of eligibility. Please attach copies of all documentation that confirms your legal eligibility to work in this country <i>(e.g., work permit, residency permit)</i> .		
14. If hired, are there accommodations the Mission needs to provide so that you can perform all the essential functions and duties of the position? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please explain.		
15. If you are applying for a position that includes driving a U.S. Government vehicle, do you have a current and valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable		
If yes, Class/Type of License _____		
If yes, have you operated a vehicle without incident for the past three years? <input type="checkbox"/> Yes <input type="checkbox"/> No		

16. What days are you available to work as part of a regularly scheduled work week? (Check all that apply.)

Sunday Monday Tuesday Wednesday Thursday Friday Saturday

17. Do any of your relatives or members of your household work for the United States Government? Yes No

If yes, provide the details below. If you need more space, use an additional sheet of paper. (See Instructions for Completing the DS-174 for the definition of relatives and members of household.)

Name	Relationship	Agency, Position, and Location

U.S. CITIZEN ELIGIBLE FAMILY MEMBER (USEFM) AND U.S. VETERANS HIRING PREFERENCE

18. Are you claiming preference in hiring under U.S. law, including the Foreign Service Act of 1980, based upon your status as either a U.S. Citizen Eligible Family Member (USEFM) or U. S. Veteran? See Instructions for Completing the DS-174 for additional information about the USEFM and U.S. Veterans hiring preference. (Check only one.)

Yes, I am a U.S. Citizen EFM and also a U.S. Veteran. Yes, I am a U.S. Veteran.
 Yes, I am a U.S. Citizen EFM. No, I am neither a U.S. Citizen EFM, nor a U.S. Veteran.

Have you invoked this preference for a prior position at this post/Mission? Yes No

If yes, which agency? _____ Date (mm-dd-yyyy) _____

If claiming eligibility for U.S. Veteran preference, you must attach a copy of your most recent DD-214, Certificate of Release or Discharge from Active Duty. If claiming conditional eligibility for U.S. Veterans preference, you must submit proof of conditional eligibility.

EDUCATION

19. Graduate School Name of School, City, State or Country	Dates Attended (mm-yyyy) From _____ To _____	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree/Diploma	Major Subject
Undergraduate College/University Name of School, City, State or Country	Dates Attended (mm-yyyy) From _____ To _____	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree/Diploma	Major Subject
High School/GED or Country Equivalent Name of School, City, State or Country	Dates Attended (mm-yyyy) From _____ To _____	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, highest grade level completed.	
Other, e.g Technical/Vocational School Name of School, City, State or Country	Dates Attended (mm-yyyy) From _____ To _____	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Certificate/Diploma	Major Subject

LANGUAGES

20. List your languages, the appropriate competency levels, and your primary/first spoken/native language using the language standards below. You may only identify one primary/first spoken/native language.

Language Indicators

- Level I** Basic Knowledge
- Level II** Limited Knowledge
- Level III** Good Working Knowledge
- Level IV** Fluent
- Level V** Professional Translator/Interpreter

Language Level To:	Speak	Read	Write
Primary -			

WORK EXPERIENCE

Include all work experience, paid and voluntary. Start with your present or most recent work experience. When describing work, list specific duties/responsibilities and accomplishments. Include supervisory responsibilities and the number of employees supervised. Go into as much detail as possible for work experience that directly relates to the advertised position. Include all periods of unemployment and the reason. *(Use additional pages, as needed.)*

21a. WORK EXPERIENCE

21a. Job Title *(If U.S. Government, include the series and grade)*

From (mm-yyyy)	To (mm-yyyy)	Salary per Year in U.S. Dollars or Local Currency	Hours per Week

Employer's Name and Address	Supervisor's Name and Contact Information
	Name
	Phone Number
	E-mail Address
Were you a supervisor in this position? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many people did you supervise? _____	May HR contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No

Describe your major duties/responsibilities and accomplishments.

Reason(s) for Leaving *(Do not write "N/A" or "not applicable".)*

21b. WORK EXPERIENCE

21b. Job Title *(If U.S. Government, include the series and grade)*

From <i>(mm-yyyy)</i>	To <i>(mm-yyyy)</i>	Salary per Year in U.S. Dollars or Local Currency	Hours per Week
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Employer's Name and Address	Supervisor's Name and Contact Information
	Name
	Phone Number
E-mail Address	

Were you a supervisor in this position? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many people did you supervise? _____	May HR contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Describe your major duties/responsibilities and accomplishments.

Reason(s) for Leaving *(Do not write "N/A" or "not applicable".)*

21c. WORK EXPERIENCE

21c. Job Title *(If U.S. Government, include the series and grade)*

From <i>(mm-yyyy)</i>	To <i>(mm-yyyy)</i>	Salary per Year in U.S. Dollars or Local Currency	Hours per Week
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Employer's Name and Address	Supervisor's Name and Contact Information
	Name
	Phone Number
E-mail Address	

Were you a supervisor in this position? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many people did you supervise? _____	May HR contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Describe your major duties/responsibilities and accomplishments.

Reason(s) for Leaving *(Do not write "N/A" or "not applicable".)*

21d. WORK EXPERIENCE21d. Job Title *(If U.S. Government, include the series and grade)*From *(mm-yyyy)*To *(mm-yyyy)*

Salary per Year in U.S. Dollars or Local Currency

Hours per Week

Employer's Name and Address

Supervisor's Name and Contact Information

Name

Phone Number

E-mail Address

Were you a supervisor in this position? Yes NoMay HR contact your supervisor? Yes NoIf yes, how many people did you supervise?

Describe your major duties/responsibilities and accomplishments.

Reason(s) for Leaving *(Do not write "N/A" or "not applicable".)***LICENSE, SKILLS, TRAINING, MEMBERSHIP, AND RECOGNITION**22. List professional licenses, certifications, typing/keyboard skills, computer skills, formal and online training, and other skills and abilities you consider relevant to the position. Include the license or certification number and attach a copy if the license or certification is a requirement of the position. If licensed in the U.S., please list the state of issuance. If licensed in another country, please list the province/state/region and country of issuance. *(Use additional pages, as necessary.)*

23. List professional organizations, associations, awards, honors, fellowships, and publications you consider significant.

REFERENCES

24. List three personal references who are not relatives or former supervisors who can speak knowledgeably of your work performance.

Name

Address

Telephone

Occupation

SIGNATURE AND CERTIFICATION

25. 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 termination/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.

Signature

Date *(mm-dd-yyyy)***SIGN**

CONTINUATION - WORK EXPERIENCE

21_ Job Title (If U.S. Government, include the series and grade)

From (mm-yyyy)	To (mm-yyyy)	Salary per Year in U.S. Dollars or Local Currency	Hours per Week
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Employer's Name and Address	Supervisor's Name and Contact Information
	Name
	Phone Number
	E-mail Address

Were you a supervisor in this position? <input type="checkbox"/> Yes <input type="checkbox"/> No	May HR contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, how many people did you supervise? _____	

Describe your major duties/responsibilities and accomplishments.

Reason(s) for Leaving (Do not write "N/A" or "not applicable".)

CONTINUATION - WORK EXPERIENCE

21_ Job Title (If U.S. Government, include the series and grade)

From (mm-yyyy)	To (mm-yyyy)	Salary per Year in U.S. Dollars or Local Currency	Hours per Week
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Employer's Name and Address	Supervisor's Name and Contact Information
	Name
	Phone Number
	E-mail Address

Were you a supervisor in this position? <input type="checkbox"/> Yes <input type="checkbox"/> No	May HR contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, how many people did you supervise? _____	

Describe your major duties/responsibilities and accomplishments.

Reason(s) for Leaving (Do not write "N/A" or "not applicable".)

**INFORMATION ABOUT MISSION EMPLOYMENT AND INSTRUCTIONS FOR COMPLETING THE DS-174,
APPLICATION FOR EMPLOYMENT AS A LOCALLY EMPLOYED STAFF OR FAMILY MEMBER**

**IMPORTANT INFORMATION ABOUT MISSION EMPLOYMENT AND APPLYING
FOR MISSION POSITIONS**

1. You must apply for Mission positions using the DS-174.
2. Make sure you are eligible to apply. For example, the Mission sometimes restricts recruitment to current Mission employees.
3. The Mission Human Resources office must receive your application package by the closing date on the Vacancy Announcement. Otherwise, you lose consideration for the position.
4. Providing your U.S. Social Security Number (*for U.S. Citizens and Legal Permanent Residents of the U.S.*), or country identification number (*for everyone else*), as well as all other personal information, is voluntary. However, Mission HR is unable to process your application if you do not voluntarily provide the information requested in the DS-174.
5. Under U.S. Law including the Foreign Service Act of 1980, as amended, U.S. Citizen Eligible Family Members and U.S. Veterans receive a preference in hiring, subject to Mission HR confirmation of eligibility.
6. Positions staffed by the U.S. Mission require that U.S. citizen males over age 18 and born after December 31, 1959, register with the United States Selective Service System, or have an exemption from the U.S. Office of Personnel Management (*OPM*).
7. U.S. law and regulation do not allow U.S. Government employees to appoint, hire, promote, or recommend their relatives or Members of Household for employment at the Mission.
8. Federal civilian annuitants may have their salaries or annuities reduced if employed by the Mission.

INSTRUCTIONS FOR COMPLETING THE DS-174

1. Type or print clearly in ink. Mission HR does not consider application packages submitted in pencil.
2. You may complete the application in English or your primary/first spoken/native language. However, if the Vacancy Announcement states that all candidates for employment must submit their applications in English, then you must submit the application in English.
3. If you need more space for an answer, attach an additional sheet of paper. In the top right corner of each sheet, include your complete name, the position title, and the Vacancy Announcement Number.
4. Answer all questions on the DS-174 that apply to you fully and in detail. If you do not answer all questions fully and in detail, you may delay the Human Resources review of your application and you may lose consideration for the position. If a question on the DS-174 does not apply to you, then write "N/A" (*Not Applicable*) in the box or space provided.
5. Attach copies of all documentation you believe is relevant to the position, your eligibility, and your qualifications to the DS-174. This includes eligibility documentation such as a copy of your work permit or residency permit. It also includes qualifications documentation such as copies of certificates of training, licenses, proficiencies, publications, and educational transcripts. If you are not sure what documentation you must submit, contact the Mission HR office. **DO NOT ATTACH ORIGINAL DOCUMENTS.**

INSTRUCTIONS FOR COMPLETION

POSITION

- Block 1. **Position Title** - Provide the position title stated on the Vacancy Announcement or media advertisement.
- Block 2. **Grade** - Provide the grade of the position (*FSN and FP/FS*). Example: FSN-8; FP/FS-6.
- Block 3. **Vacancy Announcement Number**- Provide the Vacancy Announcement Number.
- Block 4. **Date Available for Work**- Provide the date you are available to start working, if you are offered the position. (*Example: 06-01-2012.*)
- Block 5. **Last Name(s)/Surname**- Provide your last name or surname.
First Name- Provide your first or given name.
Middle Name- Provide your middle name.
- Block 6. **Other Names Used** - List all the other names, including nicknames, you use or have used in the past that are not in Block 5.
- Block 7. **Current Address** - Provide your complete current address, including apartment number, building number, mailing code, and other residential identifiers.
- Block 8. **Phone Numbers** - Provide your daytime, evening, and mobile numbers, including country, regional, area, or city codes, as appropriate.
- Block 9. **E-mail Address** - Provide your e-mail address. (*Example: JaneDoe123@hotmail.com.*) If you don't have an e-mail address, write "N/A."
- Block 10. **U.S. Citizenship** - Check the appropriate box.
- Block 11. **Permanent U.S. Resident Status** - Check the appropriate box. If you check yes, provide your permanent resident status number.
- Block 12. **12a. U.S. Social Security Number and/or 12b. Country Identification Number** - Provide your U.S. Social Security Number or your Country Identification Number. If you have both a U.S.Social Security Number and a Country Identification Number, provide both numbers.
- Block 13. **Confirmation of Eligibility** - Certify that you are legally eligible for employment in the country where the Mission is located by checking the appropriate box. Attach copies of the required paperwork (*e.g., work permit, residency permit*), if appropriate. **Do not attach the original documents.** If you are not sure you need to submit proof of eligibility paperwork, or what paperwork you need to submit, contact the Mission HR office.
- Block 14. **Accommodations** - Check the appropriate box and provide explanatory information, as appropriate.
- Block 15. **Drivers License** - Answer this question only if the position you are applying for requires driving a U.S. Government vehicle. List the type of License you have. (*Example A: Class A, to drive any tractor-trailer or combination of motor vehicle and towed vehicle where the towed vehicle exceeds a gross weight of 4,600 kilograms.*) Attach a copy of your current license to the application. Check "Yes" or "No" to indicate whether you have driven without incident within the last three years.
- Block 16. **Availability** - Check all the days you are available to work as part of a regularly scheduled work week. A regularly scheduled work week is the official work week set by the supervisor based upon the assigned duties and responsibilities of the position. Following are three examples of regularly scheduled work weeks:
- a. Monday through Friday, 8:00 a.m. until 5:00 p.m.
 - b. Monday through Thursday, 8:00 a.m. until 12:00 p.m. and Friday, 8:00 a.m. until 5:00 p.m.
 - c. Saturday through Wednesday, 7:30 a.m. until 4:30 p.m.
- Block 17. **Relatives** - Check the appropriate box. If you check "Yes," then list all relatives or members of your household who currently work for the U.S. Government. Relatives and members of household include father, mother, husband, wife, unmarried partner of the opposite or same sex, son, daughter, brother, sister, uncle, aunt, first cousin, nephew, niece, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, stepfather, stepmother, stepson, stepdaughter, stepbrother, stepsister, half brother, and half sister.

U.S. CITIZEN ELIGIBLE FAMILY MEMBER AND U.S. VETERANS HIRING PREFERENCE

Block 18. **Preference in Hiring** - Check the appropriate box. You may only check one box.

U.S. Citizen Eligible Family Members (USEFM) - For purposes of receiving a preference in hiring for a qualified position, a USEFM is an individual who meets the following criteria:

1. U.S. citizen; and
2. The spouse or domestic partner of the sponsoring employee, or a child of the sponsoring employee who is unmarried and at least 18 years old; and
3. Listed on the travel orders of a sponsoring employee, i.e., a direct-hire Foreign Service, Civil Service, or uniformed service member who is permanently assigned to or stationed abroad at a U.S. mission, or at an office of the American Institute in Taiwan, and who is under Chief of Mission authority, and either:
 - a. Resides at the sponsoring employee's post of assignment abroad or, as appropriate, at an office of the American Institute in Taiwan; or
 - b. Resides at an involuntary separate maintenance allowance (ISMA) location, authorized under 3 FAM 3232.2. If residing at an ISMA location, the individual will not be listed on the sponsoring officer's travel orders but will have a form SF-1190 processed authorizing ISMA.

Other family members or dependents on direct-hire Foreign Service, Civil Service, or uniformed services member's travel orders are not USEFMs or AEFMs for purposes of 3 FAM 8200.

If you claim status as a U.S. Citizen EFM, Mission HR may need to verify your status and eligibility. Mission HR's decision on eligibility for the preference as a USEFM is final.

U.S. Veterans

If you claim status as a U.S. Veteran, you must attach a copy of your DD-214, Certificate of Release or Discharge from Active Duty. Failure to provide a copy of your DD-214 to Mission HR by the closing date of the Vacancy Announcement means you lose eligibility for the hiring preference.

Mission HR's decision on eligibility for U.S. Veterans preference after reviewing the DD-214, or conditional eligibility documentation, is final.

USG Missions do not use points in applying the hiring preference for USEFM or U.S. Veteran candidates. USEFM and U.S. Veteran candidates generally have an equal preference in hiring; however, a U.S. Citizen EFM who is also a U.S. Veteran receives preference in hiring before all other preference candidates. Under U.S. law including the Foreign Service Act of 1980, as amended, to receive a preference in hiring, USEFM and U.S. Veteran candidates must be fully qualified before receiving first consideration for the advertised position.

EDUCATION

Block 19. Education

1. **School** - If you have graduate studies beyond a Bachelors degree or host country equivalent, start in the first block, "Graduate School." If you have college/university studies, start in the next block down, "Undergraduate/College University." If you did not attend college/university, start with the "High School/General Educational Development (*GED*)" block. (*The GED tests are a group of five tests which when passed, certifies that the taker has American or Canadian high school-level academic skills.*) Use the Technical/Vocational school block for all other formal education. List the name of the school, city and state. (*Example: Clemson University, Clemson, South Carolina, USA.*)
2. **Dates Attended** - List the dates using the mm-yyyy format. (*Example: 08-2000.*)
3. **Graduate** - Check either "Yes" or "No."
4. **Degree/Diploma and Major Subject** - If you are a college/university or technical school graduate, indicate your degree field under "Degree/Diploma."
If you double majored in school, list your major and minor fields of study under "Major Subject." (*Example: Major: Economics; Minor: History.*)

If you have university studies but did not graduate, check "No" in the "Graduate" box, write "N/A" in the "Degree/Diploma" block, and write "General course work" in the "Major Subject" block.

If you have graduate studies but did not graduate, check "No" in the "Graduate" box, write "N/A" in the "Degree/Diploma" block and write the area of graduate work you were pursuing in the "Major Subject" block. (*Example: "Psychology."*)

If you have technical school, vocational school, or other formal school education but did not graduate, check "No" in the "Graduate" block, write "N/A" in the "Degree/Diploma" block, and write the main technical or vocational course work you took. (*Example: Welding.*)

LANGUAGES

Block 20. The Mission assesses language proficiency using the following standards:

- Level I = Basic Knowledge
- Level II = Limited Knowledge
- Level III = Good Working Knowledge
- Level IV = Fluent
- Level V = Professional Translator/Interpreter

You must list your language proficiency using the Level I-V standard. You must identify one and only one language as your primary/first spoken/native language. If you are bilingual or multi-lingual, you may only choose one language as your primary/first spoken/native language. If you are not proficient in all three components of the language (*speaking, reading, and writing*), then list your proficiency in the components that apply and write "N/A" in the components that do not apply.

Following is an example of how to complete Block 20:

Language Level To:		Speak	Read	Write
Primary -	Spanish	IV	IV	IV
	English	IV	IV	IV
	Italian	II	II	I
	Arabic	I	N/A	N/A

Human Resources may require testing in one or all languages you include in your application.

WORK EXPERIENCE

Block 21. Work Experience includes all paid and volunteer work, including internships, fellowships, and grants. Include all of your work experience. List your current or most recent paid or volunteer work first in Block 21a. and work backwards. Include all periods of unemployment and the reason for the unemployment. Use additional pages, if needed.

- Job Title** - Use official job titles only. If you have work experience with the U.S. Government, include the job title, series (*if you know it*), and the grade.
Example 1 - Voucher Examiner, Series 420, Grade 7
Example 2 - Accounts Manager
- Dates of Employment** - Provide the dates of employment using the mm-yyyy format.
Example - From: 08-2000 To: 09-2008
- Salary** - Make sure you provide your annual salary, not weekly or monthly salary. You may provide salary in either U.S. dollars or the local currency of the Mission where you are applying. If you have a salary history that is not denominated in U.S. dollars or the local currency of the Mission where you are applying, convert the salary to U.S. dollars and provide it on the application.
- Hours per week** - Provide the hours of your regularly scheduled workweek.
Example: 20
- Employer's Name and Address** - Provide your employer's complete name and address.
- Supervisory Experience** - Answer "Yes" if you were a supervisor in this position and indicate the number of employees supervised.
Example: 20
- Supervisor's Name and Contact** - Provide the name and contact information of your immediate supervisor while in this position. If you do not know your supervisor's e-mail address, put "N/A." Indicate if Mission HR may contact your current supervisor.
- Duties/Responsibilities and Accomplishments** - It is your responsibility to demonstrate that you are qualified for the position for which you are applying. Read the advertised position requirements (*e.g., prior work experience, computer skills, customer service work*) on the Vacancy Announcement or media advertisement. Then describe your duties/responsibilities and accomplishments in the position in as much detail as possible. Make sure you include all formal and informal supervisory responsibilities. Indicate the percentage of time you spent performing for each major duty and responsibility (*e.g., 20 percent*). Use additional pages, if needed.

If you had a major change of duties and responsibilities while you worked for the same employer, then describe each role as a separate job (*i.e., complete block 21a, then block 21b*).
- Reason for Leaving** - Always state the reason you left your previous employment. If you are currently employed, then put "currently employed" in the "Reason for Leaving" block. You may not put "N/A" for "Not Applicable" as the reason for leaving. If you were terminated, or voluntarily or involuntarily separated, then state why in specific terms.
Example: "I was involuntarily separated because of a Reduction-In-Force in my division."

LICENSE, SKILLS, TRAINING, MEMBERSHIP, AND RECOGNITION

Block 22. Include keyboard, computer, professional licenses/certifications, formal and online training, and other skills and abilities you have that directly relate to the position you're applying for, or that you consider relevant to your candidacy. If a license or certification is a requirement of the position (*e.g., electrician certification, Registered Professional Nurse*), then you must attach a copy to your application. Do not attach the original license or certification. If you do not attach a copy to your application, you may lose consideration for the position. If a license or certification is not a requirement of the position, you may attach copies of licenses/certifications to your application that you believe are relevant to or strengthen your candidacy. Do not attach original documents. Mission HR has the authority to require proof of anything you state in your application package.

Block 23. List professional organizations, associations, awards, honors, fellowships, and publications you have that directly relate to the position you're applying for, or that you consider relevant to or strengthen your candidacy. Mission HR has the authority to require proof of honors, publications, or anything else you list in Block 23.

REFERENCES

Block 24. List three personal references. Ideally they are individuals who know you professionally and can comment on your suitability for employment at the Mission. Personal references may not be relatives or members of your household. You may wish to inform personal references that you are including their names and contact information in your application since Mission HR may contact them.

SIGNATURE AND CERTIFICATION

Block 25. It is your responsibility to sign and date your application in ink. If you do not sign and date the application, or if you sign and date the application in pencil, then you lose consideration for the position. Your signature in ink certifies that the information on and attached to your application is true, correct, complete, and made in good faith. Including false information on or attached to your application is fraud. It is grounds for not hiring you, or for terminating you after you begin to work. Signing the application also confirms that you understand that the Mission may investigate any information you voluntarily submit.

DS-174 CONTINUATION SHEET

Use the DS-174 Continuation Sheet to list your complete work experience. Use as many of the DS-174 Continuation Sheets as you need. Start at the top of the DS-174 Continuation Sheet with 21e. and proceed through the alphabet until you provide your complete work history. Use the instructions for completing Block 21 to complete the DS-174 Continuation Sheet.

PRIVACY ACT STATEMENT (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 advertised positions. The information furnished may also be used in the pre-employment fitness-for-duty process, if you are selected for a Mission position. The information solicited may also be used to seek information about you from employers, schools, banks, and others who know you.

ROUTINE USES

The information you provide in this form maybe shared with Federal, State, local, and foreign agencies to the extent relevant and necessary for that agency's decision about you. This information may be disclosed to a member of Congress or to a congressional staff member in response to an inquiry of the Congressional office made at the written request of the constituent, etc. This information may be disclosed to a member of Congressional office made at written request of the constituent about whom the record is maintained. Information may also be disclosed in the course of presenting evidence to a court, magistrate, or administrative tribunal, including disclosures to opposing counsel in the course of settlement negotiations. More information on Routine Uses for the system can be found in the System of Records Notice State-31, Human Resource Records.

DISCLOSURE

Disclosure of this information, including your social security number, is voluntary. Failure to provide the information requested on this application may result in delays in considering your application. It could result in you not receiving full consideration for the position. Incomplete addresses slow processing of your applications.

BURDEN

Public reporting burden for this collection of information is estimated to average 60 minutes 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-44, 301 4th Street, SW, Washington, DC 20547.

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.