Form Approved
OMB No. 3206-0219

OPTIONAL APPLICATION FOR FEDERAL EMPLOYMENT - OF 612

You may apply for most jobs with a resume, this form, or other written format. If your resume or application does not provide all the information requested on this form and in the job vacancy announcement, you may lose consideration for a job.

1 Job title in announcement	2 Grade(s) applying for	3 Announcement number
Pharmacy Resident Trainee	Not applicable	Not applicable

4 Last name	First and middle names	5 Social Security Number

6 Mailing address			7 Phone numbers (include area code)
City	State	ZIP Code	Daytime ( )
			Evening ( )

WORK EXPERIENCE

8 Describe your paid and nonpaid work experience related to the job for which you are applying. Do **not** attach job descriptions.

1) Job title (if Federal, include series and grade)

From (MM/YY)	To (MM/YY)	Salary	per	Hours per week
		$		

Employer's name and address	Supervisor's name and phone number
	( )

Describe your duties and accomplishments

2) Job title (if Federal, include series and grade)

From (MM/YY)	To (MM/YY)	Salary	per	Hours per week
		$		

Employer's name and address	Supervisor's name and phone number
	( )

Describe your duties and accomplishments

9 May we contact your current supervisor?

YES [ ] **NO** [ ] ▶ If we need to contact your current supervisor before making an offer, we will contact you first.

EDUCATION

10 Mark highest level completed. **Some HS** [ ] **HS/GED** [ ] **Associate** [ ] **Bachelor** [ ] **Master** [ ] **Doctoral** [ ]

11 Last high school (HS) or GED school. Give the school's name, city, State, ZIP Code (if known), and year diploma or GED received.

12 Colleges and universities attended. Do **not** attach a copy of your transcript unless requested.

Name	Total Credits Earned	Major(s)	Degree - Year
	Semester Quarter		(if any) Received
1) City State ZIP Code			
2)			
3)			

OTHER QUALIFICATIONS

13 **Job-related** training courses (give title and year). **Job-related** skills (other languages, computer software/hardware, tools, machinery, typing speed, etc.). **Job-related** certificates and licenses (current only). **Job-related** honors, awards, and special accomplishments (publications, memberships in professional/honor societies, leadership activities, public speaking, and performance awards). Give dates, but do **not** send documents unless requested.

GENERAL

14 Are you a U.S. citizen? **YES** [ ] **NO** [ ] ▶ Give the country of your citizenship. _____

15 Do you claim veterans' preference? **NO** [ ] **YES** [ ] ▶ Mark your claim of 5 or 10 points below.
5 points [ ] ▶ Attach your DD 214 or other proof. **10 points** [ ] ▶ Attach an *Application for 10-Point Veterans' Preference* (SF 15) and proof required.

16 Were you ever a Federal civilian employee?

Series	Grade	From (MM/YY)	To (MM/YY)

NO [ ] **YES** [ ] ▶ For highest civilian grade give:

17 Are you eligible for reinstatement based on career or career-conditional Federal status?
NO [ ] **YES** [ ] ▶ If requested, attach SF 50 proof.

APPLICANT CERTIFICATION

18 **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 firing me after I begin work, and may be punishable by fine or imprisonment. **I understand** that any information I give may be investigated.

SIGNATURE **DATE SIGNED**