

INSTRUCTIONS.—Answer every question below clearly and completely. Typewrite or print in INK. If you are applying for a specific United States Civil Service examination, read the examination announcement carefully and follow all directions. Mail this application to the office named in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.

APPLICATION No.

ANNOUNCEMENT

SELECTION No.

1. Name of examination, or kind of position applied for:		
2. Optional subject (if mentioned in examination announcement):		
3. Place of employment applied for:		
4. Mr. (First name) (Middle) (Maiden, if any) (Last) Mrs. <u>Miss Harold</u> - <u>Weisberg</u>		
5. Street and number or R. D. number: <u>2522 N. Nottingham Street</u> City or post office (including postal zone), and State: <u>Arlington, Virginia</u>		
6. Legal or voting residence (State): <u>Virginia</u>	7. Office phone No.: <u>Dr. 6100</u>	Home phone: <u>Dr. 2030 Bl. 7300</u>
8. Place of birth (city and State; if born outside U. S., name city and country): <u>Philadelphia, Pennsylvania</u>		
9. Date of birth (month, day, year): <u>4-7-13</u>	10. Age last birthday: <u>33</u>	11. <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
12. <input checked="" type="checkbox"/> Married <input type="checkbox"/> Single	13. Height without shoes: <u>5</u> feet <u>4</u> inches	Weight: <u>176</u> pounds
14. Have you ever been employed by the Federal Government? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If now employed by the Federal Government, give present grade and date of last change in grade: <u>GS-5 1-1-45</u>		

DO NOT WRITE IN THIS BLOCK
For Use of Civil Service Commission Only

<input type="checkbox"/> Appor.		Material <input type="checkbox"/> Submitted		Entered register:	
<input type="checkbox"/> Non-appor.		<input type="checkbox"/> Returned			
Notations:			App. Review:		
Approved:					
OPTION	GRADE	EARNED RATING	PREFER-ENCE	AUGM. RATING	
			<input type="checkbox"/> 5 points (tent.)		
			<input type="checkbox"/> 10 points		
			<input type="checkbox"/> Wife or Widow		
			<input type="checkbox"/> Disal.		
			<input type="checkbox"/> Being investigated		
INITIALS AND DATE					

Indicate "Yes" or "No" answer by placing X in proper column		YES	NO
15. (a) Would you accept short-term appointment, if offered, for—	1 to 3 months?		<input checked="" type="checkbox"/>
	3 to 6 months?		<input checked="" type="checkbox"/>
	6 to 12 months?		<input checked="" type="checkbox"/>
(b) Would you accept appointment, if offered—	in Washington, D. C.?	<input checked="" type="checkbox"/>	
	anywhere in the United States?		<input checked="" type="checkbox"/>
	outside the United States?		<input checked="" type="checkbox"/>

15. (c) If you will accept appointment in certain locations ONLY, give acceptable locations:

(d) What is the lowest entrance salary you will accept: \$ 5005.00 per year.
You will not be considered for positions paying less.

(e) If you are willing to travel, specify:
 Occasionally Frequently Constantly

18. EXPERIENCE.—You are requested to furnish all information asked for below in sufficient detail to enable the Civil Service Commission and the appointing officers of agencies to determine your qualifications for the position for which you are applying. In the spaces provided below describe EVERY position you have held. Use a separate block for EACH position. You may also include any pertinent religious, civic, welfare or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Start with your PRESENT position and work back, accounting for all periods of unemployment. Explain clearly the principal tasks which you performed in each position. Describe your experience in the Armed Services in question 17 (Military Experience).
(a) If you were ever employed in any position under a name different from that shown in Item 4 of this application, give under "Description of your work" for each position, the name used.
(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

PRESENT POSITION		
Dates of employment: (Month, year) From: <u>January 1945</u> To present time	Exact title of your present position: <u>Research analyst</u>	Salary or earnings: Starting, \$ _____ per _____ Present, \$ <u>5205.00</u> per _____
Place of employment (city and State): <u>Washington, D. C.</u>	Description of your work: <u>Under general supervision of P-6 section chief, plan and organize major research projects involving evaluation and analysis of data on Latin-American cultural and economic matters. Was responsible for collection and analysis of intelligence materials; preparation of reports on various industries; establishing and maintaining liaison with OSS branches and other government agencies; developing new sources of information; supervision of professional employees on reports. Under general supervision of assistant division chief when he was not overseas; was in charge of division's European outpost work in Washington; prepared its "target" list; briefed outpost personnel; analyzed, evaluated and prepared reports on data processed by</u>	
Name and address of employer (firm, organization, or person). If Federal, name department, bureau or establishment, and division: <u>State Dept., DPA</u>		
Kind of business or organization (e. g., wholesale silk, insurance agency, mfg. of locks, etc.): <u>Government</u>		
Number and kind of employees supervised by you: <u>Various number of professionals</u>		
Name and title of immediate supervisor: <u>Dr. Rollin Atwood, Chief, Functional Unit</u>		
Reason for desiring to change employment:		

outpost; referred materials to other branches and agencies. Was responsible for division's participation in Safehaven program.

18. CONTINUED

<p>Dates of employment: (Month, year) From: <u>About Aug. 1939</u> To: <u>Nov. 1942</u></p> <p>Place of employment (city and State): <u>Washington, D. C.</u></p> <p>Name and address of employer (firm, organization, or person). If Federal, name department, bureau or establishment, and division: <u>self</u></p> <p>Kind of business or organization (e. g., wholesale silk, insurance agency, mfg. of locks, etc.): <u>Writer</u></p> <p>Number and kind of employees supervised by you:</p> <p>Name and title of immediate supervisor:</p> <p>Reason for leaving:</p>	<p>Exact title of your position: <u>Free-lance writer on national and international affairs. Paid up to 50¢ a word. Specialized in cartels. Appeared before Congressional Committees on export. Was consulted by Congressional Committees, Government agencies with whom I cooperated, as a technical expert. Some of my work led to investigations, indictments, convictions of individuals and corporations. Several Congressmen praised a number of these articles on the floor of the House of Representatives.</u></p> <p>Salary or earnings: Starting \$ _____ per _____ Final \$ <u>5000</u> per annum</p>
<p><u>Inducted into Army</u></p> <p>Dates of employment: (Month, year) From: <u>June 1936</u> To: <u>Aug. 1939</u></p> <p>Place of employment (city and State): <u>Washington, D. C., and field</u></p> <p>Name and address of employer (firm, organization, or person). If Federal, name department, bureau or establishment, and division: <u>U. S. Senate Committee on Education & Labor</u></p> <p>Kind of business or organization (e. g., wholesale silk, insurance agency, mfg. of locks, etc.): <u>Senate investigation</u></p> <p>Number and kind of employees supervised by you: <u>Up to 25 or 30</u></p> <p>Name and title of immediate supervisor: <u>Robert Wohlforth, Secretary</u></p> <p>Reason for leaving: <u>Termination of work</u></p>	<p>Exact title of your position: <u>Editor; investigator; assistant Secretary</u></p> <p>Salary or earnings: Starting \$ _____ per _____ Final \$ <u>3200</u> per annum</p> <p>Description of your work: <u>As editor I made arrangements for the Committee's hearings, prepared exhibits for presentation as evidence, edited and published the Committee's hearings and exhibits and the reports it made to the Senate. Was responsible for making the Committee's record available to the Government, press and interested citizens. The record totaled over 20,000,000 words. As an investigator I handled cases from the beginning of inquiry in the field through the various stages leading to the hearings. The secretary is the administrative head of a Senate committee. I was assistant secretary and among my functions was that of liaison between the Dept. of Justice and the Senate and representing the Senate at the famous Harlan County conspiracy case.</u></p>
<p>Dates of employment: (Month, year) From: <u>1935</u> To: <u>June 1936</u></p> <p>Place of employment (city and State): <u>Washington, D. C.</u></p> <p>Name and address of employer (firm, organization, or person). If Federal, name department, bureau or establishment, and division: <u>Dept. of Agriculture</u></p> <p>Kind of business or organization (e. g., wholesale silk, insurance agency, mfg. of locks, etc.): <u>Government</u></p> <p>Number and kind of employees supervised by you:</p> <p>Name and title of immediate supervisor:</p> <p>Reason for leaving: <u>To take Senate job</u></p>	<p>Exact title of your position: <u>Clerk</u></p> <p>Salary or earnings: Starting \$ _____ per _____ Final \$ <u>1440</u> per annum</p> <p>Description of your work: <u>File clerk. Temporary job which I accepted on promise of first opening in public relations division. Left when promised job was not forthcoming.</u></p>
<p>Dates of employment: (Month, year) From: <u>1931 or 1932</u> To: <u>1934 or 1935</u></p> <p>Place of employment (city and State): <u>Wilmington, Del.</u></p> <p>Name and address of employer (firm, organization, or person). If Federal, name department, bureau or establishment, and division: <u>Various newspapers</u></p> <p>Kind of business or organization (e. g., wholesale silk, insurance agency, mfg. of locks, etc.): <u>Newspaper</u></p> <p>Number and kind of employees supervised by you:</p> <p>Name and title of immediate supervisor:</p> <p>Reason for leaving: <u>Came to Washington</u></p>	<p>Exact title of your position: <u>Reporter; feature writer</u></p> <p>Salary or earnings: Starting \$ _____ per _____ Final \$ _____ per _____</p> <p>Description of your work: <u>Wrote news, sports, did special interviews for Wilmington Morning News, Wilmington Sunday Star. Wrote by-line features for Philadelphia Public Ledger syndicate.</u></p>

If more space is required, use a continuation sheet (Standard Form No. 58) or a sheet of paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.

17. MILITARY EXPERIENCE.—In order to make the most effective placements of war veterans, detailed information is needed about the training and experience they have acquired in the Armed Services. Fill in the appropriate space for each service school you have attended. If you attended no special or technical schools while in the service, write in Item (a) "No attendance at service schools" and indicate in Item (c) all important changes in duty assignment, showing dates of such assignment.

<p>(a) First Special Service School attended:</p> <p>Location:</p> <p>Dates attended (months, years):</p> <p>From: _____ To: _____</p> <p>Rating received at end of this training:</p>	<p>(b) What were you taught in First Special Service School?</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>(c) Duty assignment or rating after this training (give all important changes in duty assignment whether or not you attended a Service School):</p> <p style="text-align: center;">Presentation editor, OSS</p> <p>Dates of duty assignment (months, years):</p> <p>From: July 1944 To: November 1944</p>	<p>(d) What did you do during this duty assignment?</p> <p>Prepared and edited history of secret schools operated by OSS and other visual presentations for Army. Regan handbook on Japanese government and culture.</p>
<p>(e) Second Special Service School attended:</p> <p>Location:</p> <p>Dates attended (months, years):</p> <p>From: _____ To: _____</p> <p>Rating received at end of this training:</p>	<p>(f) What were you taught in Second Special Service School?</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>(g) Duty assignment after this training:</p> <p>Dates of duty assignment (months, years):</p> <p>From: _____ To: _____</p>	<p>(h) What did you do during this duty assignment?</p> <p>_____</p> <p>_____</p> <p>_____</p>

List on a separate sheet of paper any additional experience, training, service, or special duty assignments during military service or hospitalization.

18. EDUCATION.—Circle highest grade completed:

1 2 3 4 5 6 7 8 9 10 11 12

Mark (x) the appropriate box to indicate satisfactory completion of:

Elementary School Junior High School Senior High School

(a) Give name and location of last high school attended:

Wilmington (Del.) High School

(b) Subjects studied in high school which apply to position desired:

(c) Name and Location of College or University	Major	Dates Attended		Years Completed		Degrees Conferred		Semester Hours Credit
		From—	To—	Day	Night	Title	Date	
University of Delaware, Newark, Del.	Eng.	1931	1934	3				

(d) List Your Chief Undergraduate College Subjects	Semester Hours	List Your Chief Graduate College Subjects	Semester Hours
English			
Literature			
History			
Engineering			

(e) Other training, such as vocational, business, study courses given through the Armed Forces Institute (show name and location of school), or "in-service training" in a Federal agency:	Subjects Studied	Dates Attended		Years Completed	
		From—	To—	Day	Night

19. Indicate your knowledge of foreign languages:	READING			SPEAKING			UNDERSTANDING		
	Exe.	Good	Fair	Exe.	Good	Fair	Exe.	Good	Fair
Hebrew									
German			X						
French			X						

21. Are you now or have you ever been a licensed or certified member of any trade or profession (such as pilot, electrician, radio operator, teacher, lawyer, CPA, etc.)

Yes No Give kind of license and State:

First license or certificate (year):

Latest license or certificate (year):

(a) How was your knowledge of foreign languages acquired?

School

(b) If you have traveled or resided in any foreign countries, indicate (1) names of countries, (2) dates and length of time spent there and (3) reason or purpose (e.g., business, education, recreation):

Africa, July & August 1943; Soldier

22. Give any special qualifications not covered elsewhere in your application such as:

(a) your more important publications (do NOT submit copies unless requested)

(b) your patents or inventions

(c) public speaking and public relations experience

(d) membership in professional or scientific societies, etc.

Public relations

20. List any special skills you possess and machines and equipment you can use, such as operation of short-wave radio, multilith, comptometer, key-punch, turret lathe, scientific or professional devices:

Approximate number of words per minute in typing _____, shorthand _____

23. REFERENCES.—List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Item 16 (EXPERIENCE).

FULL NAME	BUSINESS OR HOME ADDRESS (Give complete address, including street and number)	BUSINESS OR OCCUPATION
1.		
2. K. C. Blackburn	Executive Office of the President	Bureau of Budget
3. James Resbrow	Unemployment Commission, Wilmington	Asst. Director
Lydia Lee	U.S. Senate	Investigative Committee editor

24. May inquiry be made of your present employer regarding your character, qualifications, etc.? Yes No

Indicate "Yes" or "No" answer by placing X in proper column.		YES	NO	Indicate "Yes" or "No" answer by placing X in proper column.		YES	NO												
25. Are you a citizen of the United States?		<input checked="" type="checkbox"/>		35. Have you any physical defect or disability whatsoever? If your answer is "Yes," give complete details in Item 38.		<input checked="" type="checkbox"/>													
26. Do you advocate or have you ever advocated, or are you now or have you ever been a member of any organization that advocates the overthrow of the Government of the United States by force or violence? If your answer is "Yes," give complete details in Item 38.			<input checked="" type="checkbox"/>	36. (a) Were you ever in the United States Military or Naval Service during time of War?		<input checked="" type="checkbox"/>													
27. Within the past 12 months, have you habitually used intoxicating beverages to excess?			<input checked="" type="checkbox"/>	(b) Is the word "honorable" or the word "satisfactory" used in your discharge or separation papers to show the type of your discharge or separation?		<input checked="" type="checkbox"/>													
28. Since your 16th birthday, have you ever been convicted, or fined, or imprisoned, or placed on probation, or have you ever been ordered to deposit bail, for the violation of any law, police regulation or ordinance (excluding minor traffic violations for which a fine of \$25 or less was imposed)? If your answer is "Yes," list all such cases under Item 38 below. Give in each case (1) the date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case. If appointed your fingerprints will be taken.			<input checked="" type="checkbox"/>	(c) Was service performed on an active full-time basis, with full military pay and allowances?		<input checked="" type="checkbox"/>													
29. Have you ever been discharged or forced to resign for misconduct or unsatisfactory service from any position? If your answer is "Yes," give in Item 38 the name and address of employer, date, and reason in each case.			<input checked="" type="checkbox"/>	(d)	<table border="1"> <tr> <td>Date of entry or entries into service:</td> <td colspan="2">Date of separation or separations:</td> </tr> <tr> <td>12-17-42</td> <td>11-17-44</td> <td></td> </tr> <tr> <td>Branch of service (Army, Navy, M. C., C. G., etc.)</td> <td>Grade (rank) or rating at time of separation:</td> <td>Serial No.</td> </tr> <tr> <td>Army</td> <td>Corporal</td> <td>82 484 933</td> </tr> </table>			Date of entry or entries into service:	Date of separation or separations:		12-17-42	11-17-44		Branch of service (Army, Navy, M. C., C. G., etc.)	Grade (rank) or rating at time of separation:	Serial No.	Army	Corporal	82 484 933
Date of entry or entries into service:	Date of separation or separations:																		
12-17-42	11-17-44																		
Branch of service (Army, Navy, M. C., C. G., etc.)	Grade (rank) or rating at time of separation:	Serial No.																	
Army	Corporal	82 484 933																	
30. Do you receive an annuity from the U. S. or D. C. Government under any retirement act or any pension or other compensation for military or naval service? If your answer is "Yes," give in Item 38 reason for retirement, that is, age, optional, disability, or by reason of voluntary or involuntary separation after 5 years' service; amount of retirement pay, and under what retirement act; and rating if retired from military or naval service.			<input checked="" type="checkbox"/>	<p>IF YOUR ANSWERS TO THIS QUESTION (No. 36) INDICATE THAT YOU ARE ENTITLED TO VETERAN PREFERENCE, SUCH PREFERENCE WILL BE CREDITED IN THE EXAMINATION. IF APPOINTED, YOU WILL BE REQUIRED TO FURNISH TO THE APPOINTING OFFICER, PRIOR TO ENTRY ON DUTY, OFFICIAL EVIDENCE OF SEPARATION FROM YOUR LATEST PERIOD OF ACTIVE SERVICE IN THE ARMED FORCES OF THE UNITED STATES DURING TIME OF WAR. DO NOT SUBMIT PROOF OF DISCHARGE OR SEPARATION WITH THIS APPLICATION.</p>															
31. Are you an official or employee of any State, Territory, county, or municipality? If your answer is "Yes," give details in Item 38.			<input checked="" type="checkbox"/>	Indicate "Yes" or "No" answer by placing X in proper column.		YES	NO												
32. Does the U. S. Government employ in a civilian capacity any relative of yours (by blood or marriage) with whom you live or have lived within the past 6 months? If your answer is "Yes," show in Item 38 for EACH such relative: (1) full name; (2) present address; (3) relationship; (4) department or agency by whom employed, and (5) kind of appointment.			<input checked="" type="checkbox"/>	37. (a) If you served in the U. S. Military or Naval Service during peacetime ONLY, did you participate in a campaign or expedition and receive a campaign badge or service ribbon?		<input checked="" type="checkbox"/>													
33. Have you ever had a nervous break-down? If your answer is "Yes," give complete details in Item 38.			<input checked="" type="checkbox"/>	(b) Are you a disabled veteran?		<input checked="" type="checkbox"/>													
34. Have you ever had tuberculosis? If your answer is "Yes," give complete details in Item 38.			<input checked="" type="checkbox"/>	(c) Are you the unmarried widow of a veteran?		<input checked="" type="checkbox"/>													
35. Space for detailed answers to other questions (indicate item numbers to which answers apply).				(d) Are you the wife of a veteran who has service-connected disability?		<input checked="" type="checkbox"/>													
ITEM No.		ITEM No.		<p>IF YOUR ANSWER TO QUESTION 37 (a), (b), (c), OR (d) IS "YES," AND YOU WISH TO CLAIM VETERAN PREFERENCE, ATTACH TO THIS APPLICATION VETERAN PREFERENCE CLAIM (CIVIL SERVICE COMMISSION FORM 14) TOGETHER WITH THE NECESSARY PROOF SPECIFIED THEREIN.</p>															
32 Lillian Goldberg, wife; WFO; permanent				<p>THIS SPACE FOR USE OF APPOINTING OFFICE ONLY</p> <p>The information contained in the answers to Question 36 above has been verified by comparison with the discharge certificate on _____, 19____.</p>															
35 Poor vision; orthopedic conditions				Agency:	Title:														
37 Preference established. Disability claim filed.																			

ITEM No.		ITEM No.	
32	Lillian Goldberg, wife; WFO; permanent		
35	Poor vision; orthopedic conditions		
37	Preference established. Disability claim filed.		

If more space is required, use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.

FALSE STATEMENT ON THIS APPLICATION IS PUNISHABLE BY LAW (U. S. CODE, TITLE 18, SECTION 80).

I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

Date _____ Signature of applicant _____

(Sign your name in INK (one given name, initial or initials, and surname). If female, prefix Miss or Mrs. and if married use your own given name as "Mrs. Mary L. Doe.")