Supplemental Instructions for Completing Standard Form 86 (SF-86) "Questionnaire for Sensitive Positions"

A properly executed SF-86 is essential for initiating a background investigation. A poorly executed form often causes additional investigation in order to resolve ambiguous or incomplete information. This delays completion of your investigation.

Please TYPE, insure information is recorded in a logical manner especially residence and employment. The form may contain NO HANDWRITTEN CORRECTIONS. Please answer ALL questions even if they do not apply to you. Type UNKNOWN, NONE, or N/A if it is not applicable.

Form SF-86 asks for information about you in a series of numbered categories. In some categories, OPM needs more information than is required by the form. This is to assure that your investigation is as complete as possible. Your careful attention to furnishing all the information required by the form and these supplemental instructions will assist OPM in completing your background investigation in a timely manner.

The supplemental instructions below relate to and are listed by the numbered categories on the form:

Items 1 -7 Self-explanatory

Item 8 <u>CITIZENSHIP</u>

After marking the box at the right be sure to follow the instructions next to the box you marked. For example, answer 8b, 8c, 8d, or 8e. Please answer each question; however, if the question does not apply to you type "NONE" or "N/A" (not applicable). If you or your spouse are naturalized citizens, provide date, place, and U.S. District Court where naturalized (information concerning spouse can be included under Item 18). If naturalized by derivative, provide above information on parents.

Item 9 WHERE YOU HAVE LIVED

There must be <u>no gaps</u> in time in your listings of the places you have lived for the past <u>10 years</u>. Month and year of beginnings and termination of each residence should be listed. If residence is in an apartment complex, the name of the complex and specific apartment number should be included. Also, include residences while in college. It is essential that addresses are complete. That is, street number, street name, city, state and zip code. For addresses listed in the past 10 years, provide a person who knew you at that address. Telephone numbers must also be completed with area codes. **DO NOT LEAVE ANY GAPS IN TIME**.

Item 10 WHERE YOU WENT TO SCHOOL

List the month and year you began and ended your schooling at each educational institution. If you attended school within the last seven years, list professors, instructors, or others who are familiar with you and provide their complete addresses and phone numbers. List any high school, college/university, or vocational/trade school you have attended. Include complete addresses for all schools, including street number, street name, city, state and zip code. List degree, diploma, certificate, etc. and date received. If you received no such degree, indicate "NONE" or "N/A" (not applicable). If a general equivalency diploma was obtained, the state which issued it and date obtained should be noted.

Item 11 YOUR EMPLOYMENT ACTIVITIES

There must be <u>no gaps</u> in time in your employment history for the past <u>10 years</u>. List all employment, full or part-time, in chronological order (starting with current employment). All supervisors must be listed for each employment, including their telephone numbers with area codes. If not known, type "UNKNOWN" or "NONE." Insure complete address (street/city/state/zip code) is included for each employment and job description listed.

If a government employment or employment by some other large organization, show the department, bureau, division, and section or specific subdivision. This is particularly important for individuals who have had numerous assignments within the military, government, large corporations or institutions. If you are a member of a **military** reserve component or National Guard unit, list the organization, its location, and name of your immediate superior officer and the officer's phone number, if known, if not known, type "UNKNOWN", "NONE" or "N/A".

Include all periods of **self-employment** and **unemployment** including periods during which you were a **student**. For periods of unemployment, you must indicate (1) that you were a student and (2) how you were supported during that period (e.g. unemployment benefits, parents, spouse, etc.). Provide names, addresses and telephone numbers of persons who can verify **all** periods of unemployment or self-employment, such as individuals unemployed by your, landlords, parents, spouse, friends, roommates, competitors, or clients. **DO NOT LEAVE ANY GAPS IN TIME**.

Note: Employment listed on the Standard Form 86 needs to be the same as employment listed on the Optional Application for Federal Employment (OF-612) or the resume for the past 10 years.

Item 12 PEOPLE WHO KNOW YOU WELL

Please provide complete home or business address (including name of firm, street number, street name, city, state and zip code) and home or business telephone number. The telephone number listed should be a daytime number where the reference can be reached during normal working hours. References should reside in the continental United States.

Item 13 <u>YOUR SPOUSE</u> - Self-explanatory

Item 14 YOUR RELATIVES

<u>Full dates</u> (including month, date and year), <u>places of birth</u> (city and state) and <u>complete addresses</u> (including street, number, street name, city, state and <u>zip codes</u>) for all relatives should be listed. If relative is deceased place an "X" in the box and list date of birth, country of birth and country citizenship. If relative resides overseas, please indicate if they are in the military. (Do not list APO or FPO address).

- Item 15 <u>Citizenship of your Relatives and Associates</u> Self-explanatory
- Item 16 YOUR MILITARY HISTORY Follow instructions carefully
- Item 17 <u>YOUR FOREIGN ACTIVITIES</u> self-explanatory

Item 18 FOREIGN COUNTRIES YOU HAVE VISITED

Please provide the beginning and ending month and year that you have visited foreign countries in the past 10 years. This includes even short trips to Mexico and Canada. Enter "NONE" or "N/A" if you have not visited a foreign country.

Item 19 YOUR MILITARY RECORD - Self-explanatory

Item 20 SELECTIVE SERVICE RECORD

If you are a male born after December 31, 1959, please indicate whether or not you are registered with the Selective Service System. If yes, provide your registration number. You may contact the Selective Service System at 847–688-6888 and they will provide you with your registration number.

Item 21 YOUR MEDICAL RECORD

Please attach a separate sheet of paper to provide a detailed explanation of the treatment you have received in the last 10 years. Name and address of physician and condition for which you were treated should be provided. Please state whether you were hospitalized and if so, provide dates and location. Please obtain a written

statement from the physician on his or her letterhead indicating the diagnosis and prognosis. This statement should also contain the clinicians estimate as to the applicant's ability to make judgments and handle stress.

Item 22 YOUR EMPLOYMENT RECORD

Follow the instructions carefully

Item 23 YOUR POLICE RECORD

Please attach a separate sheet to provide full details regarding any arrests, contacts with law enforcement, and judicial actions, except minor traffic violations for which you paid less than \$150 fine and contacts before your 16th birthday. All other incidents must be included even if they were dismissed or you merely forfeited collateral. Any court records/documentation regarding the disposition of the charge should be included.

Item 24-25 <u>ILLEGAL DRUGS AND ALCOHOL</u>

Follow the instructions carefully. (Go back 10 years)

Item 26 <u>YOUR INVESTIGATIONS RECORD</u>

If known, please insure that agency conducting the investigation and the approximate date (month and year) of investigation are listed.

Item 27-28 YOUR FINANCIAL RECORD

List any accounts placed for collection, defaults, judgments, repossessions, etc. in the last 10 years. All delinquent debts and financial obligations must be explained in detail. If you have ever filed for bankruptcy, list the date, location of court, and case number (if known). Provide the complete name and address of the business bringing this action, the date (month and year), and the account number. If the debt(s) has been satisfied, please provide proof, e.g. statement showing zero balance, cancelled checks, money orders, etc. If the debt has not been satisfied, please contact the business and establish a repayment plan. Please provide a letter on the business' letterhead agreeing to a repayment plan.

Item 29-30 PUBLIC RECORD CIVIL COURT ACTIONS AND YOUR ASSOCIATION RECORD

Follow the instructions carefully.

Page 9 <u>CONTINUATION SPACE</u>

Use this space for additional answers to questions 9, 10 and 11.

Pages 9/10 SIGNATURE/DATE

We must have one completed <u>ORIGINAL</u> form. Our headquarters will not accept a photo copy. <u>Please make 4 copies of this form. Each copy must have an original signature and date on both pages 9 and 10</u>.

MISCELLANEOUS

When completing form, do not abbreviate names of cities. An abbreviation commonly used by residents of a city is not necessarily recognizable nationwide.