## Instructions for Optional Application for Federal Employment - OF 612

You may apply for most Federal jobs with a resume, an Optional Application for Federal Employment (OF 612), 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. Type or print clearly in black ink. Help speed the selection process by keeping your application brief and sending only the requested information. If essential to attach additional pages, include your name and Social Security Number on each page.

- For information on Federal employment, including alternative formats for persons with disabilities and veterans' preference, contact the U.S. Office of Personnel Management at 478-757-3000, TDD 478-744-2299, or via the Internet at www.USAJOBS.opm.gov.
- If you served on active duty in the United States Military and were separated under honorable conditions, you may be eligible for veterans' preference. To receive preference, if your service began after October 15, 1976, you must have a Campaign Badge, Expeditionary Medal, or a service-connected disability. Veterans' preference is not a factor for Senior Executive Service jobs or when competition is limited to status candidates (current or former career or career-conditional Federal employees).
- Most Federal jobs require United States citizenship and also that males over age 18 born after December 31, 1959, have registered with the Selective Service System or have an exemption.
- The law prohibits public officials from appointing, promoting, or recommending their relatives.
- Federal annuitants (military and civilian) may have their salaries or annuities reduced. Every employee must pay any valid delinquent debt or the agency may garnish their salary.
- Send your application to the office announcing the vacancy. If you have guestions, contact the office identified in the announcement.

## **Privacy Act Statement**

The U.S. Office of Personnel Management and other Federal agencies rate applicants for Federal jobs under the authority of sections 1104, 1302, 3301, 3304, 3320, 3361, 3393, and 3394 of title 5 of the United States Code. We need the information requested in this form and in the associated vacancy announcements to evaluate your qualifications. Other laws require us to ask about citizenship, military service, etc. In order to keep your records in order, we request your Social Security Number (SSN) under the authority of Public Law 104-134 (April 26, 1996). This law requires that any person doing business with the Federal government furnish an SSN or tax identification number. This is an amendment to title 31, Section 7701. Failure to furnish the requested information may delay or prevent action on your application. We use your SSN to seek information about you from employers, schools, banks, and others who know you. We may use your SSN in studies and computer matching with other Government files. If you do not give us your SSN or any other information requested, we cannot process your application. Also, incomplete addresses and ZIP Codes will slow processing. We may confirm information from your records with prospective nonfederal employers concerning tenure of employment, civil service status, length of service, and date and nature of action for separation as shown on personnel action forms of specifically identified individuals.

## **Public Burden Statement**

We estimate the public reporting burden for this collection will vary from 20 to 240 minutes with an average of 40 minutes per response, including time for reviewing instructions, searching existing data sources, gathering data, and completing and reviewing the information. Send comments regarding the burden statement or any other aspect of the collection of information, including suggestions for reducing this burden to the U.S. Office of Personnel Management (OPM), OPM Forms Officer, Washington, DC 20415-7900. The OMB number, 3206-0219, is currently valid. OPM may not collect this information and you are not required to respond, unless this number is displayed. Do not send completed application forms to this address. Follow directions provided in the vacancy announcement(s).

THE FEDERAL GOVERNMENT IS AN EQUAL OPPORTUNITY EMPLOYER

## OPTIONAL APPLICATION FOR FEDERAL EMPLOYMENT – OF 612

Section A – Applicant Information  ★ Use Standard State Postal Codes (abbreviations). If outside the United States of America, and you do not have a military address, type or print "OV" in the State field (Block 6c) and fill in the Country field (Block 6e) below, leaving the Zip Code field (Block 6d) blank.												
Job title in announcement			applying for									
4a. Last name		4b. First an	d middle nam	nes	5. Social Security Number							
6a. Mailing address ★			7. Phone numbers (include area code if within the United States of America)									
			7a. Daytime									
6b. City		6c. State	6d. Zip Co	de	7b. Evening							
6e. Country (if not within the United States of America)												
8. Email address (if available)												
Section B – Work Experience  Describe your paid and nonpaid work experience related to this job for which you are applying. Do not attach job description.												
Job title (if Federal, include series and grade)												
2. From (mm/yyyy) 3. To (mm/yyyy)			ary per		5. Hours per week							
6. Employer's name and addre	ess		7. Supervisor's name and phone number									
		a. Name										
		[-	b. Phone									
8. 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.												
9. Describe your duties and accomplishments												
Section C – Additional Work Experience												
Job title (if Federal, include series and grade)												
2. From (mm/yyyy)	3. To <i>(mm/yyyy)</i>	4. Sal	ary per		5. Hours per week							
6. Employer's name and addre	. Supervisor's name and phone number											
				_	7a. Name							
					7b. Phone							
8. Describe your duties and accomplishments												

Section D – Education											
1. Last High School (HS)/GED school. Give the school's name, city, state, ZIP Code (if known), and year diploma or GED received:											
2. Mark highest level comp	leted: So	ome HS	Н	S/GED A	ssociate	Bachelor	Master	Doctoral			
Colleges and universities attach a copy of your tra				Total Cred Semester	its Earned Quarter	Major(s)		Degree (if any), Year Received			
3a. Name											
City	State	Zip Code									
3b. Name											
City	State	Zip Code									
3c. Name	l	1									
City	State	Zip Code									
Section E – Other Qualifications											
memberships in professional/honor societies, leadership activities, public speaking, and performance awards). Give dates, but do <b>not</b> send documents unless requested.											
				Section F -	General						
1a. Are you a U.S. citizen?	Yes	No □ →	-	1b. If no, give	the Country of	your citizenshi	0				
2a. Do you claim veterans' preference? No ☐ Yes ☐ → If yes, mark your claim of 5 or 10 points below.  2b. 5 points ☐ → Attach your Report of Separation from Active Duty (DD 214) or other proof.  2c. 10 points ☐ → Attach an Application for 10-Point Veterans' Preference (SF 15) and proof required.											
3. Were you ever a Federa	<del> </del>	loyee? No			-	t highest civili					
3a. Series	3b. Grade			3c. From (m.	m/yyyy)		3d. To <i>(mm)</i>	<i>(</i> yyyy)			
4. Are you eligible for reinstatement based on career or career-conditional Federal status? No Yes If requested in the vacancy announcement, attach <i>Notification of Personnel Action</i> (SF 50), as proof.											
Section G – Applicant Certification											
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.											
1a. Signature							1b. Date (m	nm/dd/yyyy)			