

## FLEET READINESS DEPARTMENT

U.S. NAVAL STATION, ROTA, SPAIN PSC 819 BOX 14 FPO AE 09645-2000

Announcement:	Activity:	
	Job Title and Grade:	

Personal Information:	
Applicant Name:	Mailing Address:
Home Telephone Number:	
Cell Telephone Number:	
Email Address:	
Education:	
High School/GED School	College/University:
Years Completed:	Years Completed:
Grad? Yes No	Degree? Yes No
Address:	Major:
	Associate/Bachelor/Master/Doctoral:
Other Education Completed / Others Oua	lifications:
Other Education Completed / Others Qual	
(Don not list degrees received based solely on life experience or ob	otained from schools with little or no academics standards)
Other License or Certificate:	
Date : Licensing Agenc	y:
Date of job-related training courses, job-related skills (other langua awards, and special accomplishments.	ages, computer software/hardware, tools, etc.), job-related honors,

Work Experience #1:	
Job Title (If federal, include series & grade):	From: To:
Employer's Name and Supervisor's Name:	Describe your duties, accomplishments, and related skills: Major:
Employer's Address:	
Supervisor's Telephone Number:	
Work Experience #2:	
Job Title (If federal, include series & grade):	From: To:
Employer's Name and Supervisor's Name:	Describe your duties, accomplishments, and related skills: Major:
Employer's Address:	
Supervisor's Telephone Number:	
Work Experience #3:	
Job Title (If federal, include series & grade):	From: To:
Employer's Name and Supervisor's Name:	Describe your duties, accomplishments, and related skills: Major:
	<b>-</b>
Employer's Address:	_,
	<b>-</b> -
Supervisor's Telephone Number:	<b>¬</b>
Canada lafamashan	
General Information:	
Are you US Citizen? Yes No	Were you ever a Federal Civilian Employee? Yes No
If NO, give the Country of your Citizenship:	If YES, List highest civilian grade for the following:
Do you have SSN Card? Yes No	Series: Grade:
	From: To:

Declaration of Family Member Status (To be co	impleted by spouses and dependents):
Your answers to the following questions will be used to determine yo ity for Military Spouse Preference (MSP):	our eligibility for employment as a Family Member in Spain and eligibil-
Positions for which applying:	Announcement Number:
Sponsor's Name:	Relationship: Last 4 digits of SSN:
Sponsor's Status (Military/Civilian/Contractor):	Sponsor's Command and Work Telephone Number:
If you are Military Spouse, If your Sponsor is Military Personant	sonnel,
Date of Marriage to Sponsor:  Date of Sponsor entry into Rot	Rotation Date:
Have you accepted/declined a position in Rota? (Includes civil service scheduled, i.e. part-time or flexible)  Was this position a permanent position? Yes No No If the position was not a permanent position, Was the appointment to	
Applicant's Certification:	
I certify that, to the best of my knowledge and belief, all the informat made in good faith.	tion on and attached to this application is true, correct, complete, and
I understand that false or fraudulent information on or attached to the begin work, and may be punishable by fine or imprisonment.	nis application may be grounds for not hiring me or for firing me after I
I understand that any information I give may be investigated.	
Applicant's Signature:	Date of Application:

The Department of the Navy is an Equal Employment Opportunity Employer. All qualified candidates will receive consideration without regard to race, color, religion, sex, national origin, age, disability, marital status, political affiliation, sexual orientation or any other non-merit factor.