



# EMPLOYMENT APPLICATION FOR LOCALLY EMPLOYED STAFF OR FAMILY MEMBER

POSITION					
/acancy Announcement Number		Position Title			
<b>SECTION 1: PERSONAL INFORMATION</b>	TO BE COMPLET	ΓED BY AL	L APPLICA	ANTS	
Name (Last, First or Given Name)					
Other Names Used					
Address					
Email	Telephone Number				
Does your relative work in this Embassy or Consulate	? If yes, tell us their na	me and the se	ction where th	ey work.	
Are you able to legally work in this country? (U.S. Government does not sponsor work visas unless		No ancy Announce	ement.)		
If this job includes driving a U.S. Government vehicle,	do you have a current	and valid drive	er's license?	Yes	No
SECTION 2: EDUCATION					
High School/Secondary Education (Name, City)	Dates Attended (mm-yyyy)  From				
Trade/Technical (Name, City)	Dates Attended (mm-yyyy)	Did yo		rtificate/Diploma	Major Subject
	From		es Io		
Undergraduate/Bachelor's Degree (Name, City)	Dates Attended (mm-yyyy) From			egree/Diploma	Major Subject
Graduate Degree (Name, City)	Dates Attended (mm-yyyy) From	Did yo	res	egree/Diploma	Major Subject
SECTION 3: LANGUAGES					
Languages  1 Basic - Examples: Basic greetings, phrases, r 2 Limited - Examples: Directions, simple questi 3 Good working knowledge - Examples: Conv 4 Fluent - Examples: Infer nuanced meaning fro 5 Translator - Examples: Certified professional	ons versations about familia om complex document	S	olex document	:s	
anguage Speaking (Pro		vide level)	Reading (Pr	ovide level)	Writing (Provide level)

SECTION 4: WORK EXPERIENCE					
Paid and Voluntary - Please begin by listing your most current work experience and go back 10 years (or longer, if relevant for the job.)					
Job Title					
From (mm-yyyy)	To (mm-yyyy)	Yearly S	Yearly Salary (Local currency) Hours per Week		
( ,,,,,,,	( ,,,,,,		, (,		
Employer Name, A	ddress and Phone N	umber			
Supervisory Respo	_		Supervisor Name		
Yes	No				
Main Duties and Re	esponsibilities				
Reason for leaving					
Job Title					
From (mm-yyyy)	To (mm-yyyy)	Yearly S	alary (Local currency)	Hours per Week	
Employer Name, A	Employer Name, Address and Phone Number				
Supervisory Respo	Supervisory Responsibilities?  Supervisor Name  No				
Main Duties and Re	esponsibilities				
Reason for leaving					
Job Title					
From (mm-yyyy)	To (mm-yyyy)	Yearly Salary (Local currency)		Hours per Week	
Employer Name, Address and Phone Number					
Supervisory Responsibilities?  Supervisor Name  No					
Main Duties and Responsibilities					
Reason for leaving					

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<b>SECTION 4: W</b>	ORK EXPERIE	NCE (Continued)			
Job Title					
From (mm-yyyy)	To (mm-yyyy)	Yearly Salary (Local	currency)		Hours per Week
Employer Name, A	ddress and Phone N	umber			
Supervisory Responsibilities?  Supervisor Name  No					
Main Duties and Ro	esponsibilities				
Reason for leaving					
SECTION 5: C	ITIZENSHIP				
	(not TDY) to this U.S ection 6.		Chief of Mission authori		ent) of a direct hire FS, CS or uniformed service office of the American Institute in Taiwan?
			corps (FSFRC). (SF-50 ked my preference at the		D214 required\
_	•			•	worked in (enter Agency/job)
	Service on Leave Wi		ny preference at this r	ost. Thave	worked in (enter Agency/job)
		ureau-specific reempl	oyment rights.		
SECTION 6: D	ECLARATION				
made in go separation/	od faith. I understand dismissal after I begi	I that false or fraudule n work, and may be p	nt information on or att	ached to the prisonment	ed to this application is true, correct, complete, and is application may be grounds for not hiring me, or for according to this country's law or U.S. law. I ay be investigated.
PRIVACY AND PAPERWORK REDUCTION ACT STATEMENTS (For U.S. Citizens and Legal Permanent Residents of the U.S.)					
AUTHORITIES The i	nformation is sought pu	rsuant to The Foreign Se	rvice Act of 1980, as ame	nded, and 22	2 U.S.C. 2669(c).
PURPOSE The information solicited on this form will be used to establish your eligibility and qualifications for job vacancies at U.S. Missions.					
Congressional Office	in response to your writ	-	ation on Routine Uses ca		ssary for that agency to make employment decisions and to a System of Records Notices State-31, Human Resource
DISCLOSURE Disclodelayed for consideration		is voluntary. Failure to p	rovide the requested infor	mation may r	esult in your application not receiving full consideration or being
data sources, gatherin	ng the necessary docun s this collection displays	nentation, providing the ire a currently valid OMB co	nformation and/or docume	nts required, e comments o	s per response, including time required for searching existing and reviewing the final collection. You do not have to supply on the accuracy of this burden estimate and/or 20006.
		EQUAL C	PPORTUNITY	EMPL	OYER
The LLC Mission prov	idea equal espertusity				hout regard to race, color, religion, say, national origin, ago

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The EEO complaint procedure is not available to individuals who believe they have been denied equal opportunity based upon marital status or political affiliation. Individuals with such complaints should avail themselves of the appropriate grievance procedures, remedies for prohibited personnel practices, and/or courts for relief.

disability, political affiliation, marital status, protected genetic information, or sexual orientation.

# EMPLOYMENT APPLICATION FOR LOCALLY EMPLOYED STAFF OR FAMILY MEMBER INSTRUCTIONS

#### **SECTION 1 - PERSONAL INFORMATION**

Name - Last Name, First Name

Other names used - All other names used, including nicknames

Address - Current mailing address, including apartment number, building number, or mailing code

Email - Complete email address. (IMPORTANT: Most correspondence will be via email.)

Phone Number - Cellphone, mobile or landline

#### Does your relative work in this Embassy or Consulate?

Relative is a husband, wife, domestic partner, member of household, father, father-in-law, stepfather, mother, mother-in-law, stepmother, son, son-in-law, stepson, daughter, daughter-in-law, stepdaughter, brother, brother-in-law, half-brother, sister, sister-in-law, half-sister, uncle, aunt, first cousin, nephew, or niece.

#### **SECTION 2 - EDUCATION**

Enter all that apply. You may be asked to provide a copy of your diploma or certification at the interview phase, or if asked by HR.

#### **SECTION 3 - LANGUAGES**

The Mission assesses the language proficiency using the following standards:

- 1 Basic Examples: I can use basic greetings and phrases; I can read numbers and signs.
- 2 Limited Examples: I can give basic directions, simple questions
- 3 Good working knowledge Examples: Conversations about familiar topics, complex documents
- 4 Fluent Examples: Infer nuanced meaning from complex documents
- 5 Translator Examples: Certified professional translator in this language

List language proficiency and identify the level for Speaking, Reading and Writing for each. The Vacancy Announcement states whether these languages will or may be tested.

Language	Speaking (Provide level)	Reading (Provide level)	Writing (Provide level)
English	4 Fluent	4 Fluent	4 Fluent
Italian	2 Limited	1 Basic	1 Basic

#### **SECTION 4 - WORK EXPERIENCE**

Paid and Voluntary - Start with current experience and go back 10 years or longer, if relevant to this job.

Please complete all required information to the best of your knowledge. You must provide the month and year of your employment. If you need additional space, please attach additional pages to your application.

Job Title

From (mm-yyyy)	To (mm-yyyy)	Yearly Salary (Local currency)	Hours per Week
Employer Name, A	ddress and Phone N	lumber	
Supervisory Respo	nsibilities?	Supervisor Name	
Main Duties and Re	esponsibilities		
Reason for leaving			

## **SECTION 5 - FOR U.S. CITIZENS ONLY**

Select all that apply and include the required documents (as stated) with the application. Additional documents may be requested by HR at the interview phase.

### **SECTION 6 - DECLARATION**

All applicants must read the declaration and mark their agreement to proceed with the application.