

Name: _____ SSN: _____

31a. Work/Additional Experience

Military Unit/Company/Organization name: _____

Address: _____

From (MM/DD/YYYY): _____ To (MM/DD/YYYY): _____ If currently employed Yes

Number of employees supervised: _____ Hours per week _____

Part time (Y / N) Full time (Y / N) Hours per month _____

Salary per week _____ Salary per month _____

Starting \$ _____ Ending \$ _____

Reason for leaving: _____

Immediate supervisor's name: _____

Supervisor's phone number _____

May we ask your present employer about your character, qualifications and work records? Yes No

Exact job title & AFSC / MOS: _____

Description of Work Performed/Duties: ALL applicants: You MUST explain duties in detail and in your own words to be eligible for this vacancy. **USA Jobs applicants: The information below will be compared to your responses to the USA Staffing questionnaire and if it does not support your responses, you will be deemed ineligible for this vacancy.**