

Continuation Form 2

SUPPLEMENT TO APPLICATION – FOR INTERNAL USE ONLY

GENERAL INFORMATION

Name						
	Last,		First,		MI.	
Date of Birth						
	Year		Month		Day	
Driver's License Number					State	
US Citizen	YES		NO		If Non US Citizen Complete Part 2 of SFMIS Pass Request Sheet	

PREFERENCE ELIGIBILITY

	YES	NO
Do you claim military spouse preference (MSP)? <i>If Yes, please attach a copy of your spouse's PCS orders, which lists you as the spouse.</i>		
Do you claim Transition Hiring Preference (THP) for involuntary Separated military member under PL 101-510, National Defense Authorization Act? If yes, you must present your Transition assistance identification card. <i>If Yes, have you accepted or declined a Nonappropriated fund position since your separation from active duty status?</i>		
Do you claim Veteran's Preference? <i>If Yes, please attach the Member 4 copy of your DD 214 to this application.</i>		

AVAILABILITY

Are you available to work	YES	NO
40 Hours per week?		
Less than 40 Hours?		
Less than 20 Hours?		
In a Flexible position? <i>(Scheduled as needed)</i>		
Weekends?		
Days?		
Nights?		

PAY REQUIREMENT

What is the lowest pay you are willing to accept?	
What is the grade you are willing to accept?	

REFERENCES

Do you have any RELATIVES/FAMILY working at Kirtland AFB?	
<i>If Yes, please list name, relationship and work place.</i>	

YOUR POLICE RECORD (Do not include anything that happened before your 16th birthday)

In the last 7 years, have you been arrested for, charged with, or convicted of any offense(s) ? (Leave out traffic fines of less than \$ 150) <i>If you answered "Yes", explain your answer(s) in the space provided</i>				YES	NO
Mont/Year	Offense	Action Taken	Law Enforcement Authority or Court	State	Zip Code