

RESUME OF MILITARY EXPERIENCE FOR HRO

PRIVACY ACT INFORMATION

The office of Personnel Management is authorized to rate applicants for federal jobs under Sections 1302, 3301, and 3304 of Title 5 of the US Code. We need the information you put on this form to see how well your education and work skills qualify you for a Federal job. We also need information on matters such as citizenship and military service to see whether you are affected by laws we must follow in deciding who may be employed by the Federal Government. We cannot give you a rating, which is the first step toward getting a job, if you do not answer these questions.

We must have your social security number, SSAN, to keep your records straight because other people may have the same name and birthdate. The SSAN has been used to keep records since 1943 when Executive Order 9397 asked agencies to do so. The Office of Personnel Management may also use your SSAN to make requests for information about you from employees, schools, banks and others who know you but only as allowed by law. The information we collect by using your SSAN will be used for employment purposes and also for studies and statistics that will not identify you.

Information we have about you may also be given to Federal, State, and local agencies for checking on law violations or for other lawful purposes. We may also notify your school placement office if you are selected for a Federal job.

NAME: _____ **ADDRESS:** _____

ANNOUNCEMENT NO.: _____ **POSITION TITLE:** _____

I am presently a member of the AIR GUARD ARMY GUARD NEITHER

1. List Military Service (National Guard, Army, Navy, Air Force, Marine Corps, Reserve, etc. by date). Make a new entry for each major change of duty, career field, service, etc. A detailed description of duties should be shown on your resume. Resumes should follow the guidelines described on TNHR 58, TN National Guard Application Format, which can be obtained through the local Human Resource Office.

FROM	TO	BRANCH OF SERVICE	MILITARY UNIT	RANK	DUTY TITLE	AFSC/MOS

2. Military Education and Training - NON-FLYING SERVICE SCHOOLS COMPLETED:

FROM	TO	AFSC/MOS	TITLE AND LOCATION OF COURSE

3. Military Extension Course or CDC:

TITLE OF COURSE	AFSC/MOS	DATE COMPLETED

NOTE: FLYING STATUS PERSONNEL MUST ALSO COMPLETE THE REVERSE SIDE OF THIS FORM.

APPLICANT'S SIGNATURE: _____ **DATE:** _____

SUPPLEMENTAL INFORMATION FOR FLYING MEMBERS

SECTION I: EXPERIENCE AS A FLYING CREW MEMBER ON ACTIVE DUTY

FROM	TO	DUTY ASGMT/SSI/MOS	TYPE ACFT	YRS	MO	DAYS

SECTION II: EXPERIENCE AS A FLYING CREW MEMBER IN DRILL STATUS

FROM	TO	DUTY ASGMT/SSI/MOS	TYPE ACFT	YRS	MO	DAYS

SECTION III: ADDITIONAL CREDITABLE TRAINING/EXPERIENCE (INCLLUE FLYING SCHOOLS)

FROM	TO	EXERCISE/MISSION	TYPE ACFT	YRS	MO	DAYS

SECTION IV: ADDITIONAL FLIGHT TRAINING PERIODS (AFTP'S)

Are you currently checked out and on flying status? YES NO

Total number of flying hours for position to be filled:

Total number of flying hours in unit aircraft for position to be filled:

SECTION V: REMARKS
