| Standard Form 171-A - *Continuation Sheet for SF 171* 

Form Approved:

	Attach all SF 171-A's to	your application at tl	he top of page 3.		OMB No. 3206-0012			
. Name (Last, First, Middle Ini	2. Social Security Number							
Job Title or Announcement N	4. Date Completed							
DDITIONAL WORK E	XPERIENCE BLOCKS							
Name and address of emp	Dates employed (give month, day and year) From: To:		Average number of hours per week	Number of employee you supervised				
				Salary or earnings		Your reason for leaving		
			Starting \$ Ending \$	per				
Your immediate supervisor Name	Area Code Telephone No.	Exact title of your job			ent <i>(civilian or military)</i> list this job, the date of your la:			
						(skill codes, etc.)		
Name and address of emp	oloyer's organization <i>( include Zli</i>	P Code, if known )	Dates employed (give n	nonth, day and year) To:	Average number of hours per week	Number of employee you supervised		
				10.				
			Salary or earnings		Your reason for le	aving		
			Starting \$	per				
			Ending \$	per				

Description of work: Describe your specific duties, responsibilities and accomplishments in this job, including the job title(s) of any employees you supervised. If you describe more than one type of work (for example, carpentry and painting, or personnel and budget), write the approximate percentage of time you spent doing each.

Exact title of your job

Area Code | Telephone No.

If Federal employment (civilian or military) list series, grade or rank,

and, if promoted in this job, the date of your last promotion

Your immediate supervisor

## Standard Form 171-A - Continuation Sheet for SF 171 (Back) Attach all SF 171-A's to your application at the top of page 3.

1. Name (Last, First, Middle Initial)

Form Approved: OMB No. 3206-0012

2. Social Security Number

3. Job Title or Announcement Number You Are Applying For									4. Date Completed	
ADDITIONAL WORK EX	PERIENC	E BLOCKS								
Name and address of employer's organization (include ZIP Code, if known)				Dates employed (give month, day and year)			Average number of		Number of employees	
			From:	-	То:	hours per week		you supervised		
				Salary or earnings			Your reason for leaving			
						per				
				Ending \$		per				
Your immediate supervisor Name	Area Code Telephone No.		Exact title of your job			If Federal employment (civilian or military) list series, grade or rank, and, if promoted in this job, the date of your last promotion				

Description of work: Describe your specific duties, responsibilities and accomplishments in this job, including the job title(s) of any employees you supervised. If you describe more than one type of work (for example, carpentry and painting, or personnel and budget), write the approximate percentage of time you spent doing each.

For Agency Use (skill codes, etc.)