DEPARTMENT OF HOMELAND SECURITY U.S. COAST GUARD ANSC 7001 (04-21) See Prive	DMELAND SECURITY District Division Flotilia S. COAST GUARD ENROLLMENT APPLICATION District Division Flotilia							
SECTION I - PERSONAL DATA O					DDLE NAME			
	FIRST	NAME			DDLE NAME	SUFFIX		
SOCIAL SECURITY NO.	DATE (OF BIRTH			SPOUSE	NAME		
MAILING ADDRESS			•		6-DIGIT O	CCUPATION CODE		
CITY					ST 🔻	ZIP+ 4		
EMAIL 1			EMAIL 2					
HOME		BUS	NESS		CE	ELL		
FAX		BC	DAT		PA	GER		
Height:(inches) Weigh	t:	_Hair Color:	Eye Col	or:	Blood Ty	/pe (if known)		
	Vhite or Cau	=	can Indian or Alask or African America			erican an or Pacific Islander		
Who do you feel is responsib	le for rec	cruiting you int	o the Auxiliary	? Name	ə			
SECTION II - SKILLS BANK INPU	T - Compl	leted by applica	nt					
A. Check appropriate answers: 1. Are 2. Are		ig to travel outsiding to do CG or AL			l Yes □n Yes □n			
B. Select days/evenings available for C	G support o	perations.						
	Mon. Mon.	☐ Tue. ☐ Tue.	☐ Wed. ☐ Wed.			∃Fri. □Sat. ∃Fri. □Sat.		
		C. From the Skills Bank Codes (pages 12-16) enter up to five skills that you possess and are willing to offer. #1 #2 #3 #4 #5						
SECTION III - EMERGENCY CONTACT INFORMATION (Someone not living with you) - Completed by applicant								
SECTION III - EMERGENCY C						t5		
SECTION III - EMERGENCY C LAST NAME	ONTACT					pleted by applicant		
	ONTACT	INFORMATION	I (Someone not	t living wi	th you) - Cor			
LAST NAME	ONTACT	INFORMATION FIRST NAME	I (Someone not	t living wi	th you) - Com SUFFIX	npleted by applicant RELATIONSHIF		
LAST NAME STREET ADDRESS		INFORMATION FIRST NAME CIT	I (Someone not Y SINESS	t living wi	th you) - Con SUFFIX	TRELATIONSHIP		
LAST NAME STREET ADDRESS HOME		INFORMATION FIRST NAME CIT BUS	I (Someone not Y SINESS CHMENTS - see	t living wi MI	th you) - Con SUFFIX	TRELATIONSHIP		
LAST NAME STREET ADDRESS HOME SECTION IV - FLOTILLA CERT	ONTACT	INFORMATION FIRST NAME CIT BUS	I (Someone not Y SINESS CHMENTS - see MPL ID Numbe	e instruc	th you) - Con SUFFIX	TRELATIONSHIP		
LAST NAME STREET ADDRESS HOME SECTION IV - FLOTILLA CERT	ONTACT	INFORMATION FIRST NAME CIT BUS DN AND ATTAC DId Member / E ate	I (Someone not Y SINESS CHMENTS - see MPL ID Numbe Score	t living wi MI	th you) - Com SUFFIX ST	TRELATIONSHIP		
LAST NAME STREET ADDRESS HOME SECTION IV - FLOTILLA CERT New Enrollment	ONTACT	INFORMATION FIRST NAME CIT BUS DN AND ATTAC DId Member / E ate Dating Safety Co	I (Someone not Y SINESS CHMENTS - see MPL ID Numbe Score ourse Certificate	t living wi MI	th you) - Com SUFFIX ST tions	ZIP + 4		
LAST NAME STREET ADDRESS HOME SECTION IV - FLOTILLA CERT New Enrollment	ONTACT	INFORMATION FIRST NAME CIT BUS DIA AND ATTAC DIA Member / E ate Dating Safety Co rds (2) Prior o	I (Someone not Y SINESS CHMENTS - see MPL ID Numbe Score Score Surse Certificate clearance docur	t living wi MI	th you) - Com SUFFIX ST tions	ZIP + 4		

All previous editions are obsolete

ENROLLMENT APPLICATION

SECTION V - APPLICANT INTERVIEW RECORD - Completed by interviewer

INTERVIEWER CHECKS OFF EACH ITEM AS DISCUSSED.

- □ What is The Auxiliary? Persons interested in actively supporting the civilian component of the U.S. Coast Guard. Not a yacht club. A service organization composed of volunteers with emphasis on active support of many Coast Guard missions.
- □ What Members Can Expect From The Auxiliary Training, new skills, fellowship, public service. A sense of pride from assisting others.
- □ What The Auxiliary Expects From Members Dedication, fellowship, public service, professional conduct and participation.
- Importance of Professional Conduct in All Activities Review general Coast Guard Auxiliary uniform and appearance policies, including tattooing, body marking and body piercing policies. Direct reflection on the Coast Guard and the Auxiliary. Need for sustaining quality programs and missions. Official Coast Guard/Auxiliary orders. Member training with emphasis on professionalism. Intolerance of sexual discrimination and harassment.
- Every Member is Expected to Participate in Some Program Examples: patrols, public education, training, recruiting, public affairs, service as elected or staff officer and attendance at flotilla meetings.
- Training And Qualifications Opportunities Are Provided To Help Participation In Auxiliary Programs Vessel examiners, air and surface operations, Auxiliary speciality courses, radio operator, public affairs, watchstander, instructor, maritime environmental patrols, navigational aids verifier, member services, interpreter, AUXCHEF.
- Personal Costs Involved Dues, uniforms, other costs. (e.g., mileage and equipment)
- □ Your Contribution to The Auxiliary Special/professional skills, time, support of programs, involvement and fellowship.
- Personnel Security Investigation Unfavorable PSI may result in disenrollment. See PSI Notice on page 3.

SECTION VI - PARENT/GUARDIAN SIGNATURE if Applicant is a Minor

I/We certify that this applicant has no other legal guardian other than me/us and I/we consent to his/her membership in the United States Coast Guard Auxiliary.

PARENT/GUARDIAN SIGNATURE

DATE

SECTION VII - APPLICANT STATEMENT AND SIGNATURE - Completed by applicant

1. Are you currently serving as a member of the U.S. Armed Forces? Yes \Box No \Box If Yes, indicate branch: USA \Box USN \Box USMC \Box USAF \Box USCG \Box If yes, indicate status: Active Duty \Box Reserve \Box National Guard \Box Air National Guard \Box . 2. Have you ever served as a member of the U.S. Armed Forces in the past? Yes \Box No \Box If Yes, indicate branch: USA \Box USN \Box USNC \Box USAF \Box USCG \Box You must attach to this application a copy of your DD-214 (Certificate of Release or Discharge from Active Duty) which shows the entry in the "Reenlistment Code" block.

3. Have you ever been convicted of a violation of any law of the United States, any State, possession or territory, the District of Columbia, or the Commonwealth of Puerto Rico classified as a major misdemeanor or a felony? Yes \Box No \Box If Yes, you must attach to this application a statement of specifics including date, city and State offense occurred, disposition, and any comments including mitigating circumstances, along with a copy of your court documents.

4. Do you have a pending or unresolved criminal court action or judicial proceeding? Yes \Box No \Box If Yes, you must attach to this application a statement of specifics including effective date, city and State offense occurred, along with a copy of your court documents.

5. Are you under criminal restraint, serving a sentence, on parole, probation, or other civil restraint? Yes \Box No \Box If Yes, you must attach to this application a statement of specifics including effective date, city and State offense occurred, along with a copy of your court documents.

6. I affirm under the penalties of perjury as to the truth of all the statements contained in this application and authorize verification for the official use of the U.S. Coast Guard and U.S. Coast Guard Auxiliary. I understand that any false statement contained herein is grounds for my disenrollment from the U.S. Coast Guard Auxiliary.

I PLEDGE TO SUPPORT THE U.S. COAST GUARD AUXILIARY AND ITS PURPOSES, AND TO ABIDE BY THE GOVERN-ING POLICIES ESTABLISHED BY THE COMMANDANT OF THE U.S. COAST GUARD.

APPLICANT	SIGNATURE

DATE

SECTION VIII - DIRECTOR OF AUXILIARY (DIRAUX) ENDORSEMENT MEMBER NUMBER DATE OF ENROLLMENT BASE ENROLLMENT DATE APPLICANT IS ACCEPTED DIRAUX SIGNATURE DATE Director of Auxiliary waiver letter attached, if applicable - see SEC VII. DATE DATE Note: If applicant is not accepted, explain in detail on a separate sheet of paper and attach NOTICE: The copy of this form submitted to DIRAUX/SECCEN MUST HAVE original signatures and dates signed in ink.

ANSC-7001 (04-21)	ENROLLMEN	IT APPLICATION	Page 3 of 14
SECTION IX - VERIFICATION C	OF U.S. CITIZENSHI	P - See instructions	
SECTION A - To be filled out by ap			
I attest that I am (Check one of the			
A U.S. citizen or national by bir		erritory/possession	
A U.S. citizen, but was not borr			
SECTION B - To be completed by a		. ,	,
or by a 🗌 Law Enforcement (LE) C	-		equired- see Section IV.
Birth Certificate showing that y			
FS-240 (Report of Birth Abroad		nited States) Month/Day/Year	
Explanation			
FS-545 (Certificate of Birth-For			
DS-1350 (Certificate of Birth is			
	• •	ed States Passport Card (current o	r expired)
A Certificate of U.S. Citizenship		hth/Day/Year Issued	
		# Month/Day/Yea	r
A Certificate of Naturalization (
		Certificate # Mont	h/Dav/Year
••••···	0.0.00 1	· · · · · · · · · · · · · · · · · · ·	
AUXILIARY FT/CV NAME	EMPLID	SIGNATURE	DATE
		CICITATIONE	DALE
			DATE
LAW ENFORCEMENT OFFICER NAME	AGENCY & ID #	SIGNATURE	DATE
SECTION X - PRIOR/CURRENT	CLEARANCE DET	AILS - Completed by applicant	- See instructions
I have 🗌 have not 🗌 been issued	a security clearance	by a federal agency within the pas	t ten (10) years. If yes, SEE
INSTRUCTIONS and complete page	ges 6, 8 & 9.		
NOTES			
	PRIVACY A		
In accordance with 5 USC 55		g information is provided to you v	vhen supplying personal
information to the United Stat	tes Coast Guard.		
		he information: 14 USC Sec 823	
		s intended to be used: To establish	h eligibility for enrollment
and a record for the individua 3. THE ROUTINE USES which			address and personal
		information: Provide identification ary. (2) Members of the Auxiliary.	i, address and personal
		mation is mandatory or voluntary	(required by law or op-
		not providing all or any part of the	
Disclosure of this information		ire to provide information will prev	
person in the Auxiliary.			
DEBS	SONNEL SECURITY	INVESTIGATION STATEMENT	
-		Security Investigation (PSI) is no	ot a guarantee of mem-
bership. An unfavorable PSI of	determination may	result in your disenrollment des	spite any training, du-
ties, activities you may have	performed and/or p	ersonal investments in time, ef	fort, resources you may
have expended as part of the	Auxiliary.		
NOTICE: The copy of this form su	ubmitted to DIRAUX/SE	CCEN MUST HAVE original signatur	es and dates signed in ink.

ANSC-7001	1 (04-21	1)) ENROLLMENT APPLICATION Page 4 of 14				4 of 14								
OFI FORM 86C September 2001			SPF	ECIAI	LAG	REI	EMEN	Т СН	ECK (S	AC)			OF PERSC eral Investig		MANAGEMENT rvices
United States Coas Agreement :	st Guard - I	DHS	OF US	PM SF				OPN	A Codes			Case Num	ber		
	2004	1		NLY											
	A	AGENCY	USE C) NLY ((COMP	LETE	ITEMS	1 THRC	OUGH 14 U	SING INS	TRUCTIONS	FROM TI	HE BACK)		
1.SUBJECT S FUI Last Name	LL NAME			First	Name				Middle	Name (Su	ffiz)	2. DATE Month	OF BIRT		Year
Last Name				rirst	Name				Midule	Name (Su	llix)	Month		ay	1 car
3. PLACE OF BI	RTH (Use			ode for t	the Sta	-						4. SOCIA	AL SECUR	ITY NU	MBER
City		Co	unty			St	ate		Country	T					
5. OTHER NAM	ES USED A	AND DA			SED									1	
Name				From h Year	r		To h Year	. Nan	ie			Fror Month		Ν	To Month Year
Name				From th Yea	ar		To h Year	. Nan	ne			Fror Month		Ν	To Month Year
6. SEX (Mark o	ne hox)		7.	SPECI		REEN	MENT C	ODES	8.	POSITI	ION TITLE				
Female	Jine DOX)		<i>'</i> •	STECIA	IL AG	REEN		ODES	0.	105111					
Male															
9. SON			10. S	01				11 IP	AC-ALC N	umbor		12 1 200	unting Data		
H S	1	0	H	S]	1	0	11. 11	AC-ALC N	umber		12. Acco		•	
13. OTHER IN	FORMATI	ION REC	QUIREE) BY AC	GREEN	MENT									
a. CITIZENSHIP				I am a	US c	itizen	or nation	al by hirt	h in the US	or US te	rritory/possessi	on	Answer ite	ms h and	d
Mark the box at that reflects you				1 ann a	0.5. 0	itizen or national by birth in the U.S. or U.S. territory/possession Answer items b and d									
citizenship statu follow its instru-				I am a	U.S. c	citizen, but I was NOT born in the U.SAnswer items b, c, and d					d				
				I am n	ot a U.	S. citiz	zen					Ans	wer items b	and e	
(Code N) Bure	eau of Vi	ital Stat	tistics	□Com	plete	all b	locks a	s requir	ed.						
Mother S Full Nan	ne						Mother	s Maider	n Name			Father	s Full Nam	e	
b.															
(Code I) Com	plete additio s on the for						ck. All ç	uestions	in item 13 (c-e) must be	e answered. If r	io response	is necessary	or applic	cable,
c. UNITED STAT			If you		S. Citiz	,	were no	t born in	the U.S., pro	ovide inform	nation about one	e or more of	f the followi	ng proofs	of your
Naturalization Cer	rtificate (W	here wer	e you na	uturalized			1	1							
Court			Cit	-			State	Certif	icate Numbe	er		1	Month/Day/	Year Issue	ed
Citizenship Certific City	cate (Where	e was the	<u>certifica</u>	te issued	d?)		State	Certif	icate Numbe	er		1	Month/Day/	Year Issue	ed
State Department I	Form 240 [Report	of Birth	Abroad	of a C	`itizen	of the U	nited Sta	tes						
Give the date the for was prepared and give explanation if neede	rm M ve an	Ionth/Day		1101044		planatio		intea sta							
U.S. Passport	u.					1						1			
This may be either a current or previous U.S. Passport				Pass	sport Nur	nber				Month/D	ay/Year Issu	ied			
d. DUAL CITIZE	NSHIP If								nother the right.	Coun	try				
e. ALIEN If you	are an alien	, provide	the follo	wing info	ormatio	on:									
Place You Entered the United States	City				State	N	Date Y Ionth	You Enter Day	red U.S. Year		egistration Num	lber	Count	ry(ies) of	Citizenship
14. Name and Ti	the of P	uostin - O)ffisi-1			e:	atumo - P	Doguert	ng Official		Tolonh	Inmhor		Date	
14. Name and Ti	ine of Keqt	uestillg U	metai			orgna	ature of	request	ng Official		Telephone N ()	umper		Date	

ENROLLMENT APPLICATION

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Standard Form 85 Revised December 2013 U.S. Office of Personnel Management 5 CFR Parts 731 and 736 Form Approved OMB No. 3206-0261

QUESTIONNAIRE FOR NON-SENSITIVE POSITIONS UNITED STATES OF AMERICA AUTHORIZATION FOR RELEASE OF INFORMATION

Carefully read this authorization to release information about you, then sign and date it in ink.

I Authorize any investigator, special agent, or other duly accredited representative of the authorized Federal agency conducting my background investigation or reinvestigation to obtain any information relating to my activities from individuals, schools, residential management agents, employers, criminal justice agencies, credit bureaus, consumer reporting agencies, collection agencies, retail business establishments, or other sources of information to include publically available electronic information. This information may include, but is not limited to, my academic, residential, achievement, performance, attendance, disciplinary, employment history, and criminal history record information.

I understand that, for some sources of information, a separate specific release will be needed, and I may be contacted for such a release at a later date.

I Authorize the Social Security Administration (SSA) to verify my Social Security Number (to match my name, Social Security Number, and date of birth with information in SSA records and provide the results of the match) to the United States Office of Personnel Management (OPM) or other Federal agency requesting or conducting my investigation for the purposes outlined above. I authorize SSA to provide explanatory information to OPM, or to the other Federal agency requesting or conducting my investigation, in the event of a discrepancy.

I Authorize custodians of records and other sources of information pertaining to me to release such information upon request of the investigator, special agent, or other duly accredited representative of any Federal agency authorized above regardless of any previous agreement to the contrary.

I Understand that the information released by records custodians and sources of information is for official use by the Federal Government only for the purposes provided in this Standard Form 85, and that it may be disclosed by the Government only as authorized by law.

Photocopies of this authorization with my signature are valid. This authorization is valid for two (2) years from the date signed.

Signature (Sign in ink)	Full name (T)	pe or pri	int legibly)	Date signed (mm/dd/yyyy)
Other names used	·			Social Security Number
Current street address Apt. #	City (Country)	State	ZIP Code	Home telephone number

PRIOR/CURRENT INVESTIGATION INFORMATION COVER SHEET

Note: The investigation must have been within past ten years. The SF 86C (pages 8 & 9) must be completed, signed, dated and attached to this cover sheet.

APPLICANT NAME

MEMBER ID NUMBER

TYPE INVESTIGATION (SSBI, NAC, NACLC, ETC)

AGENCY THAT INITIATED INVESTIGATION (MUST BE A FEDERAL AGENCY)

ARE YOU CURRENTLY AN EMPLOYEE OR HAVE YOU EVER BEEN AN EMPLOYEE WITH THE FEDERAL SERVICE?

HAVE YOU HAD A BREAK IN FEDERAL SERVICE SINCE YOUR LAST BACKGROUND INVESTIGATION?

I CERTIFY THAT ALL ABOVE ENTRIES ARE CORRECT TO THE BEST OF MY KNOWLEDGE.

APPLICANT SIGNATURE	DATE
DIRAUX SIGNATURE	DATE

ENROLLMENT APPLICATION

Standard Form 86C Revised July 2008 U.S. Office of Personnel Management 5 CFR Parts 731, 732, and 736

STANDARD FORM 86 CERTIFICATION (SF 86C)

Form approved: OMB No. 3206 0005 NSN 7540-01-500-4881 86-111

Follow instructions fully or we cannot process your form. Be sure to sign and date the certification statement on page 2. If you have any questions, contact the office that gave you this form.

The Standard Form 86 (SF 86), Questionnaire for National Security Positions, is completed by persons under consideration for or retention in national security positions as defined in 5 CFR 732 and for positions requiring access to classified information, as defined in Executive Order 12968. Depending upon the purpose of your investigation, the United States (U.S) Government is authorized to ask for this information under Executive Orders 10450, 10865, 12333, and 12968; Sections 3301, 3302, and 9101 of title 5, U.S. Code (U.S.C.); Sections 2165 and 2201 of title 42, U.S.C.; chapter 23 of title 50, U.S.C.; and parts 2, 5, 731, 732, and 736 of title 5, Code of Federal Regulations.

There are many situations where individuals are required to fill out a new SF 86 when the sole purpose is to determine if any information on a previously executed SF 86 has changed. This requires extensive work by the individual even if nothing has changed. The SF 86C is a certification document that allows the reporting of changes in previously reported information on the SF 86. This certification will be in lieu of completing a new SF 86 and will allow the individual to indicate that there have been no changes in the data provided on the most recently filed SF 86 or it will allow the individual to easily provide new or changed information. No investigation will be initiated based solely on the execution of this form.

Your Social Security Number (SSN) is needed to identify your unique records. Although disclosure of your SSN is not mandatory, failure to disclose your SSN may prevent or delay the processing of your background investigation. The authority for soliciting and verifying your SSN is Executive Order 9397.

PRIVACY ACT ROUTINE USES

1. To the Department of Justice when: (a) the agency or any component thereof; or (b) any employee of the agency in his or her official capacity; or (c) any employee of the agency in his or her dividual capacity where the Department of Justice has agreed to represent the employee; or (d) the United States Government, is a party to litigation or has interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation and the use of such records by the Department of Justice is therefore deemed by the agency to be for a purpose that is compatible with the purpose for which the agency collected the records.

2. To a court or adjudicative body in a proceeding when: (a) the agency or any component thereof; or (b) any employee of the agency in his or her official capacity; or (c) any employee of the agency in his or her individual capacity where the Department of Justice has agreed to represent the employee; or (d) the United States Government is a party to litigation or has interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation and the use of such records is therefore deemed by the agency to be for a purpose that is compatible with the purpose for which the agency collected the records.

3. Except as noted in Question 23 and 27, when a record on its face, or in conjunction with other records, indicates a violation or potential violation of law, whether civil, criminal, or regulatory in nature, and whether arising by general statute, particular program statute, regulation, rule, or order issued pursuant thereto, the relevant records may be disclosed to the appropriate Federal, foreign, State, local, tribal, or other public authority responsible for enforcing, investigating or prosecuting such violation or charged with enforcing or implementing the statute, rule, regulation, or order.

4. To any source or potential source from which information is requested in the course of an investigation concerning the hiring or retention of an employee or other personnel action, or the issuing or etention of a security clearance, contract, grant, license, or other benefit, to the extent necessary to identify the individual, inform the source of the nature and purpose of the investigation, and to identify the type of information requested. 5. To a Federal, State, local, foreign, tribal, or other public authority the fact that this system of records contains information relevant to the retention of an employee, or the retention of a security clearance, contract, license, grant, or other benefit. The other agency or licensing organization may then make a request supported by written consent of the individual for the entire record if it so chooses. No disclosure will be made unless the information has been determined to be sufficiently reliable to support a referral to another office within the agency or to another Federal agency for criminal, civil, administrative, personnel, or regulatory action.

6. To contractors, grantees, experts, consultants, or volunteers when necessary to perform a function or service related to this record for which they have been engaged. Such recipients shall be required to comply with the Privacy Act of 1974, as amended.

7. To the news media or the general public, factual information the disclosure of which would be in the public interest and which would not constitute an unwarranted invasion of personal privacy.

8. To a Federal, State, or local agency, or other appropriate entities or individuals, or through established liaison channels to selected foreign governments, in order to enable an intelligence agency to carry out its responsibilities under the National Security Act of 1947 as amended, the CIA Act of 1949 as amended, Executive Order 12333 or any successor order, applicable national security directives, or classified implementing procedures approved by the Attorney General and promulgated pursuant to such statutes, orders or directives.

9. To a Member of Congress or to a Congressional staff member in response to an inquiry of the Congressional office made at the written request of the constituent about whom the record is maintained.

10. To the National Archives and Records Administration for records management inspections conducted under 44 U.S.C. 2904 and 2906.

11. To the Office of Management and Budget when necessary to the review of private relief legislation.

PUBLIC BURDEN INFORMATION

Public burden reporting for this collection of information averages 15 minutes, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to OPM Forms Officer, U.S. Office of Personnel Management, 1900 E Street NW, Washington, DC 20415. Do not send your completed form to this address, send it to the office that provided you the form. The OMB clearance number, 3206-0005, is currently valid. OPM may not collect this information, and you are not required to respond, unless this number is displayed.

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ENROLLMENT APPLICATION

Standard Form 86C Revised July 2008 U.S. Office of Personnel Management 5 CFR Parts 731, 732, and 736

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STANDARD FORM 86 CERTIFICATION (SF 86C)

Form approved: OMB No. 3206 0005 NSN 7540-01-500-4881 86-111

Page 8 of 14

INSTRUCTIONS: Type or legibly print your answers in ink (if this form is not legible, it will not be accepted). Complete this form referencing information contained in your most recent SF 86 or information disclosed upon the date of your last background investigation. All questions on this form must be answered. Any changes that you make to this form after you sign it must be initialed and dated by you. Under certain limited circumstances, agencies may modify your response(s) consistent with your intent. The United States Criminal Code (title 18, section 1001) provides that knowingly falsifying or concealing a material fact is a felony which may result in fines and/or up to 5 years of imprisonment.

Do not provide information you have already provided on your most recent SF 86. Any "Yes" responses under Block 2 must be explained in Block 3. If additional space is needed, use a blank sheet of paper. **Each blank sheet of paper you use must contain your name and SSN at the top of the page.** Conclude by **certifying** the accuracy of your answers in Block 4, Certification. If you have any questions, contact the office that gave you the form, or a Government security officer.

Block 1 - Identification								
Full name (last, first, middle, maiden)	Social Security Number (SSN)							
Date of birth (mm/dd/yyyy)	Place of birth (include City (Country) and State)							
Work telephone number	Home telephone number	E-mail						

Block 2 – Questions from the SF 86

INSTRUCTIONS: The following Questions correlate with your SF 86. If you report **no change** to a Question, place an "X" in the **No** box. If there is **a change**, place an "X" in the **Yes** box. All **Yes** answers **must** be explained under Block 3, Explanations/Remarks.

Yes	No	
		Question 1. Full Name
		Question 4. Social Security Number
		Question 5. Other Names Used
		Question 9. Citizenship
		Question 10. Citizenship Information
		Question 11. Where You Have Lived
		Question 12. Where You Went to School
		Question 13. Employment Activities
		Question 14. Selective Service Record
		Question 15. Military History
		Question 17. Marital Status
		Question 18. Relatives
		Question 19. Foreign Contacts
		Question 20. Foreign Activities
		Question 21. Mental and Emotional Health
		Question 22. Police Record
		Question 23. Use of Illegal Drugs and Drug Activity
		Question 24. Use of Alcohol
		Question 25. Investigations and Clearance Record
		Question 26. Financial Record
		Question 27. Use of Information Technology Systems
		Question 28. Involvement in Non-Criminal Court Actions
		Question 29. Association Record

U.S. Office of Personnel Management

5 CFR Parts 731, 732, and 736

Standard Form 86C

Revised July 2008

ENROLLMENT APPLICATION

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STANDARD FORM 86 CERTIFICATION (SF 86C)

Form approved: OMB No. 3206 0005 NSN 7540-01-500-4881 86-111

Block 3 – Explanations/Remarks

INSTRUCTIONS: Before each answer, identify the SF 86 Question number associated with your answer. For example, if you have had a change of residence, write "Question 11" and list your new address.

Check this block if additional comments are attached. Place your **name** and **SSN** at the top of each page.

Check this block if your SF 86 is attached.

Block 4 – Certification

I certify that the above information includes all changes to my most recent SF 86 or since my last investigation. Changes, if any, are explained under Block 3. My statements on this form, and on any attachments to it, are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that a knowing and willful false statement on this form can be punished by fine or imprisonment or both (18 U.S.C. 1001). I understand that intentionally withholding, misrepresenting, or falsifying information will have a negative affect on my security clearance, employment prospects, or job status up to and including denial or revocation of my security clearance, or my removal and debarment from Federal service.

Signature (Sign in Ink)		Date (mm/dd/yyyy)
	Enter your Social Security Number here	→
Page 2		

ENROLLMENT APPLICATION

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- **1. <u>GENERAL</u>** Everyone requesting membership in the U.S. Coast Guard Auxiliary must complete this form.
 - a. Read all instructions carefully.
 - b. This form is used to supply new member personal information for entry into the Auxiliary database.
 - c. Data from this form is reported in detail (with the exceptions of Date of Birth, Social Security Administration Number, and ID card information) on the Flotilla Roster, Member Summary and Status Report among others.
 - d. The use of black versus blue ink is not a SECCEN requirement. DESPITE THE INSTRUCTIONS TO USE BLACK INK ON THE SF85 FORM AND THE FD-258 FINGERPRINT CARDS, THE OFFICE OF PERSONNEL MANAGEMENT AUTHORIZES THE USE OF BLUE OR BLACK INK FOR COMPLETING THE WRITTEN PORTION OF ALL OF THESE FORMS.
- 2. <u>FLOTILLA NUMBER</u> Completed by Flotilla Commander (FC) or Flotilla Human Resources (FSO-HR) officer. Enter the District, Division and Flotilla number of the unit submitting this application in the area in the upper right corner next to the form name.
- 3. <u>SECTION I PERSONAL DATA OF APPLICANT</u> To be completed by applicant.
 - a. LAST NAME, FIRST NAME, MIDDLE NAME and SUFFIX Enter full legal name.
 - b. SOCIAL SECURITY ADMINISTRATION NUMBER-Enter SSAN (See 1c above).
 - c. DATE OF BIRTH-Enter DOB using MM/DD/YY numeric format, 06/18/54 (See 1c above) . Membership eligibility begins at 17 years of age.
 - d. GENDER- Check one of the gender boxes.
 - e. SPOUSE NAME-Use spouse's given name no nicknames.
 - f. MAILING ADDRESS-Enter current mailing address.
 - g. OCCUPATION-Enter code for current or recent occupation from list beginning on page 12. For "Retired", enter "99-0000".
 - h. CITY-Enter name of city where address is located. If residence is outside the United States, also enter country.
 - i. STATE-Use the official two-letter postal code. Leave blank if outside the United States.
 - j. ZIP+4-Enter the full 9 digit ZIP code. Leave blank if outside the United States.
 - k. EMAIL 1 Enter primary email address if available.
 - I. EMAIL 2 Enter secondary email address if available.
 - m. HOME/BUSINESS/CELL/FAX/BOAT/PAGER Enter area code and telephone number(s) or N/A as applicable.
 - n. ID CARD INFORMATION Enter your height in inches, weight, hair color, eye color and blood type (if known).
 - (See 1c above).
 - o. ÈTHNICITY (Óptional) Check box which describes your ethnic group.
 - p. RECRUITER Enter the name of the person you feel is responsible for your recrutiment.
- 4. <u>SECTION II SKILLS BANK INPUT</u> To be completed by applicant.
 - a. Check appropriate boxes indicating your willingness to travel and perform administrative missions.
 - b. Select days/evenings that you may have available.
 - c. Enter the six-digit Bureau of Labor Statistics code for up to five areas of expertise you could offer to the Coast Guard, particularly in times of emergency, from list beginning on page 12.
- 5. <u>SECTION III</u> EMERGENCY CONTACT INFORMATION (Someone not living with you) To be completed by applicant.

Enter name, emergency contact's relationship, address and phone numbers with area codes.

- 6. <u>SECTION IV</u> FLOTILLA CERTIFICATION AND ATTACHMENTS -To be completed by the FC or FSO-HR. (See 6.f below).
 - a. APPLICATION TYPE-Check whether applicant is a new member or reenrolling. If reenrolling provide previous member ID number. If applicant is or was Active Duty CG, CG Reserve or a civilian employee of the CG, please include Employee ID Number.
 - b. NEW MEMBER EXAM Enter date and score.
 - c. PRIVACY ACT STATEMENT Check box after applicant reads.
 - d. BOATING SAFETY COURSE CERTIFICATE Check yes or no. Note: Only certificates listed in the Auxiliary Manual are acceptable. If the applicant successfully challenges one of our tests, indicate "Yes" even though no certificate is issued.
 - e. REQUIRED ATTACHMENTS Ensure that all of the listed items are included with the application package, particularly the proof of citizenship photocopy. DD-214 (if applicable) must include "Reenlistment Code".
 - f. FLOTILLA COMMANDER SIGNATURE The Flotilla Commander must sign and date application.
- 7. SECTION V APPLICANT'S INTERVIEW RECORD To be completed by the interviewer.
 - a. GENERAL This form is used as a check off sheet to make certain the applicant has been informed of

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the membership opportunities and obligations in the U.S. Coast Guard Auxiliary.

- b. Interviewer prints name, signs and dates.
- 8. <u>SECTION VI</u> PARENT/GUARDIAN STATEMENT To be completed by applicant's parent or guardian. Applicants who are 17 must have at least one parent or guardian complete this section. Sign and date using blue or black ink.
- 9. <u>SECTION VII</u> APPLICANT STATEMENT AND SIGNATURE To be completed by the applicant. Double check accuracy of information provided through the entire form because signature/date in this section reflects applicant's acknowledgement of such.
- SECTION VIII DIRAUX ENDORSEMENT To be completed by the Director of Auxiliary. Enter new member number, date of enrollment and base enrollment date (MM/DD/YY). Sign and date.
- 11. SECTION IX USCG AUXILIARY/SECCEN VERIFICATION OF U.S. CITIZENSHIP

Section A to be completed by applicant.

Attest to U.S. citizenship by birth in U.S. or not born in the U.S.

Section B to be completed by Auxiliary Fingerprint Technician or Auxiliary Citizenship Verifier or by Law Enforcement Officer who has viewed the original document that is provided as proof of citizenship. A Law Enforcement Officer (e.g. policeman, state trooper) may fingerprint and/or verify applicant's citizenship. If an LE official performs either requirement, they must provide their name, their agency name and agency ID number, sign in ink and date. The document referenced for proof of citizenship must be present for viewing, and a photocopy of that original document must accompany this application when submitted to DIRAUX. Photocopy ONLY the first two (2) pages (personal photo and information pages) of a passport. Photocopy both sides of a passport ID card.

- 12. <u>SECTION X</u> PRIOR/CURRENT CLEARANCES To be completed by the applicant & DIRAUX. Applicable only if a security clearance has been issued to the applicant by a federal agency within the past 10 years. In all cases where this is the case, attach the federal agency source that describes the security clearance that was granted. Complete page 6 - Prior/Current Investigation Information cover sheet, and pages 8 and 9 - SF86C Certification Form and include them with this application, Instructions for SF 86C are included as page 7 of this form. Additional guidance can be obtained from the CG Security Center Service Hotline at (757) 579-6222.
- **13.** <u>NOTES</u> Enter any pertinent notes.
- 14. OFI FORM 86C SPECIAL AGREEMENT CHECK To be completed by applicant.

American citizens need to fill out 1 through 6 and 13.a & 13.b.

Naturalized citizens need to fill out 1 through 6 and 13.a., 13.b & 13.c

Dual citizens need to fill out 1 through 6 and 13.a., 13.b., 13.c & 13.d Note: If they are not "citizens", either by birth or naturalized, they cannot be Auxiliarists. Make SURE you place an entry in each field; insert "N/A" if not applicable.

- 1. Your full name must be given. If you are a "Jr.", "Sr.", "III", etc., enter the abbreviation in the space for suffix after the middle name. If you have initials only, enter each initial in the appropriate box and show (IO). If you have no middle name, enter "NMN".
- 2. Provide the month, day, year of your birth. Example: Enter June 7, 1942 as: "06/07/42".

3. Your place of birth: Enter full name of city/town under CITY. Under COUNTY, give county if born in United States. Using the coding shown below, provide the abbreviation for the State if born in the U.S. or its territories. Provide country of birth under COUNTRY only if not born in the United States. CODING FOR STATES, DISTRICT OF COLUMBIA, AND U.S. TERRITORIES (ITEM 3)

					,		(-,	
Alabama	AL	Hawaii	н	Massachusetts	MA	New Mexico	NM	South Dakota	SD
Alaska	AK	Idaho	ID	Michigan	MI	New York	NY	Tennessee	TN
Arizona	AZ	Illinois	IL	Minnesota	MN	North Carolina	NC	Texas	ТΧ
Arkansas	AR	Indiana	IN	Mississippi	MS	North Dakota	ND	Utah	UT
California	CA	Iowa	IA	Missouri	МО	Ohio	OH	Vermont	VT
Colorado	СО	Kansas	KS	Montana	MT	Oklahoma	OK	Virginia	VA
Connecticut	СТ	Kentucky	KY	Nebraska	NE	Oregon	OR	Washington	WA
Delaware	DE	Louisiana	LA	Nevada	NV	Pennsylvania	PA	West Virginia	WV
Florida	FL	Maine	ME	New Hampshire	NH	Rhode Island	RI	Wisconsin	WI
Georgia	GA	Maryland	MD	New Jersey	NJ	South Carolina	SC	Wyoming	WY
American Samoa	AS	District of Columbia	DC	Guam	GU	Northern Mariana Island	СМ	Puerto Rico	PR
Trust Territory	TT	Virgin Islands	VI						

4. Provide your Social Security Number.

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- 5. To the extent information is available, list all other names you were known by or are now using. If you are female, and are or have been married, include maiden name, and other married names if married more than once. Provide beginning and ending dates for use of each name. Identify maiden name with "NEE". 6. Check the appropriate box to specify sex as MALE or FEMALE. 13. Other Information Required a. Check appropriate box (note: U.S. citizenship is a requirement for membership; the box indicating "Not a citizen" cannot be checked.) NOTE: If you check the first box, complete items b and d. If you check the second box, complete items b, c, and d. b. Enter first, middle, and last names of your mother and father. Enter your mother's full maiden name. c. Enter information about one or more proofs of citizenship - only if the second box in a. was checked. d. If you have dual citizenship, enter country other than U.S. here. STANDARD FORM 85 - AUTHORIZATION FOR RELEASE OF INFORMATION - To be completed by 15. applicant. Enter your full name and other names used, if any, your Social Security Number, and your current address, including your home telephone number with area code. Sign and date. SKILLS CODES - These codes are based upon the Standard Occupational Classification System from the 16. U.S. Bureau of Labor Statistics. Use these codes to characterize skills that you possess even if you were never formally employed in that specific occupation. SKILLS BANK CODES 13-1190 Miscellaneous Business Operations Specialists Life, Physical, and Social Science **Management Occupations** 13-2010 Accountants and Auditors Occupations 11-1010 Chief Executives 13-2020 Property Appraisers and Assessors 11-1020 General and Operations Managers 13-2030 Budget Analysts
- 11-1030 Legislators
- 11-2010 Advertising and Promotions Managers
- 11-2020 Marketing and Sales Managers
- 11-2030 Public Relations and Fundraising Managers
- 11-3010 Administrative Services and Facilities Managers
- 11-3020 Computer and Information Systems Managers
- 11-3030 Financial Managers
- 11-3050 Industrial Production Managers
- 11-3060 Purchasing Managers
- 11-3070 Transportation, Storage, and Distribution Managers
- 11-3110 Compensation and Benefits Managers
- 11-3120 Human Resources Managers
- 11-3130 Training and Development Managers
- 11-9010 Farmers, Ranchers, and Other Agricultural Managers
- 11-9020 Construction Managers
- 11-9030 Education and Childcare Administrators
- 11-9040 Architectural and Engineering Managers
- 11-9050 Food Service Managers
- 11-9070 Entertainment and Recreation Managers
- 11-9080 Lodging Managers
- 11-9110 Medical and Health Services Managers
- 11-9120 Natural Sciences Managers
- 11-9130 Postmasters and Mail Superintendents
- 11-9140 Property, Real Estate, and Community
- Association Managers
- 11-9150 Social and Community Service Managers
- 11-9160 Emergency Management Directors
- 11-9170 Personal Service Managers
- 11-9190 Miscellaneous Managers

Business and Financial Operations Occupations

- 13-1010 Agents and Business Managers of Artists, Performers, and Athletes
- 13-1020 Buyers and Purchasing Agents
- 13-1030 Claims Adjusters, Appraisers, Examiners, and Investigators
- 13-1040 Compliance Officers
- 13-1050 Cost Estimators
- 13-1070 Human Resources Workers
- 13-1080 Logisticians and Project Management Specialists
- 13-1110 Management Analysts
- 13-1120 Meeting, Convention, and Event Planners
- 13-1130 Fundraisers
- 13-1140 Compensation, Benefits, and Job Analysis Specialists
- 13-1150 Training and Development Specialists
- 13-1160 Market Research Analysts and Marketing Specialists

- 13-2040 Credit Analysts
- 13-2050 Financial Analysts and Advisors
- 13-2060 Financial Examiners
- 13-2070 Credit Counselors and Loan Officers 13-2080 Tax Examiners, Collectors and Preparers, and
- **Revenue Agents**
- 13-2090 Miscellaneous Financial Specialists

Computer and Mathematical Occupations

- 15-1210 Computer and Information Analysts
- 15-1220 Computer and Information Research
- Scientists
- 15-1230 Computer Support Specialists
- 15-1240 Database and Network Administrators and Architects
- 15-1250 Software and Web Developers, Programmers, and Testers
- 15-1290 Miscellaneous Computer Occupations
- 15-2010 Actuaries
- 15-2020 Mathematicians
- 15-2030 Operations Research Analysts
- 15-2040 Statisticians 15-2050 Data Scientists
- 15-2090 Miscellaneous Mathematical Science Occupations

Architecture and Engineering Occupations

- 17-1010 Architects, Except Naval
- 17-1020 Surveyors, Cartographers, and
- Photogrammetrists
- 17-2010 Aerospace Engineers
- 17-2020 Agricultural Engineers
- 17-2030 Bioengineers and Biomedical Engineers 17-2040 Chemical Engineers
- 17-2050 Civil Engineers
- 17-2060 Computer Hardware Engineers
- 17-2070 Electrical and Electronics Engineers
- 17-2080 Environmental Engineers
- 17-2110 Industrial Engineers, Including Health and Safety
- 17-2120 Marine Engineers and Naval Architects
- 17-2130 Materials Engineers
- 17-2140 Mechanical Engineers
- 17-2150 Mining and Geological Engineers, Including Mining Safety Engineers
- 17-2160 Nuclear Engineers
- 17-2170 Petroleum Engineers
- 17-2190 Miscellaneous Engineers
- 17-3010 Drafters
- 17-3020 Engineering Technologists and Technicians, Except Drafters
- 17-3030 Surveying and Mapping Technicians

- 19-1010 Agricultural and Food Scientists 19-1020 Biological Scientists
- 19-1030 Conservation Scientists and Foresters
- 19-1040 Medical Scientists
- 19-1090 Miscellaneous Life Scientists

19-2020 Atmospheric and Space Scientists

19-2030 Chemists and Materials Scientists

19-2090 Miscellaneous Physical Scientists

19-3050 Urban and Regional Planners

Related Workers

19-4020 Biological Technicians

19-4030 Chemical Technicians

Technicians

19-4050 Nuclear Technicians

19-3090 Miscellaneous Social Scientists and

19-4010 Agricultural and Food Science Technicians

19-4040 Environmental Science and Geoscience

19-4060 Social Science Research Assistants

19-4070 Forest and Conservation Technicians

Science Technicians

and Technicians

21-1010 Counselors

21-2010 Clergy

21-1020 Social Workers

Workers

19-4090 Miscellaneous Life, Physical, and Social

19-5010 Occupational Health and Safety Specialists

Community and Social Service

Occupations

21-2020 Directors, Religious Activities and Education

Legal Occupations

21-1090 Miscellaneous Community and Social

Service Specialists

21-2090 Miscellaneous Religious Workers

23-1010 Lawyers and Judicial Law Clerks

23-2010 Paralegals and Legal Assistants

23-1020 Judges, Magistrates, and Other Judicial

23-2090 Miscellaneous Legal Support Workers

19-2040 Environmental Scientists and Geoscientists

19-2010 Astronomers and Physicists

19-3010 Economists

19-3030 Psychologists

19-3040 Sociologists

19-3020 Survey Researchers

Educational Instruction and Library Occupations

25-1010	Business Teachers, Postsecondary
25-1020	Math and Computer Science Teachers,
	Postsecondary
25-1030	Engineering and Architecture Teachers,
	Postsecondary
25-1040	Life Sciences Teachers, Postsecondary
25-1050	Physical Sciences Teachers, Postsecondary
25-1060	Social Sciences Teachers, Postsecondary
25-1070	Health Teachers, Postsecondary
25-1080	Education and Library Science Teachers,
	Postsecondary
25-1110	Law, Criminal Justice, and Social Work
	Teachers, Postsecondary
25-1120	Arts, Communications, History, and
	Humanities Teachers, Postsecondary
25-1190	Miscellaneous Postsecondary Teachers
25-2010	Preschool and Kindergarten Teachers
25-2020	Elementary and Middle School Teachers
25-2030	Secondary School Teachers
25-2050	Special Education Teachers
25-3010	Adult Basic Education, Adult Secondary
	Education, and English as a Second Language
25-3020	Self-Enrichment Teachers
25-3030	Substitute Teachers, Short-Term
25-3040	Tutors

- 25-3090 Miscellaneous Teachers and Instructors
- 25-4010 Archivists, Curators, and Museum Technicians
- 25-4020 Librarians and Media Collections Specialists
- 25-4030 Library Technicians
- 25-9020 Farm and Home Management Educators
- 25-9030 Instructional Coordinators
- 25-9040 Teaching Assistants
- 25-9090 Miscellaneous Educational Instruction and Library Workers

Arts, Design, Entertainment, Sports, and Media Occupations

- 27-1010 Artists and Related Workers
- 27-1020 Designers
- 27-2010 Actors, Producers, and Directors 27-2020 Athletes, Coaches, Umpires, and Related
- Workers
- 27-2030 Dancers and Choreographers
- 27-2040 Musicians, Singers, and Related Workers 27-2090 Miscellaneous Entertainers and Performers,
- Sports and Related Workers 27-3010 Broadcast Announcers and Radio Disc Jockeys
- 27-3020 News Analysts, Reporters and Journalists
- 27-3030 Public Relations Specialists
- 27-3040 Writers and Editors
- 27-3090 Miscellaneous Media and Communication Workers
- 27-4010 Broadcast, Sound, and Lighting Technicians
- 27-4020 Photographers
- 27-4030 Television, Video, and Film Camera Operators and Editors
- 27-4090 Miscellaneous Media and Communication Equipment Workers

Healthcare Practitioners and Technical Occupations

- 29-1010 Chiropractors
- 29-1020 Dentists
- 29-1030 Dietitians and Nutritionists
- 29-1040 Optometrists
- 29-1050 Pharmacists
- 29-1070 Physician Assistants
- 29-1080 Podiatrists
- 29-1120 Therapists
- 29-1130 Veterinarians
- 29-1140 Registered Nurses
- 29-1150 Nurse Anesthetists
- 29-1160 Nurse Midwives 29-1170 Nurse Practitioners
- 29-1180 Audiologists
- 29-1210 Physicians
- 29-1240 Surgeons
- 29-1290 Miscellaneous Healthcare Diagnosing or Treating Practitioners
- 29-2010 Clinical Laboratory Technologists and Technicians Technologists and Technicians

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39-2020 Animal Caretakers

39-4020 Funeral Attendants

Arrangers

Workers

Cosmetologists 39-5090 Miscellaneous Personal Appearance

39-7010 Tour and Travel Guides 39-9010 Childcare Workers

39-9040 Residential Advisors

Workers

Salespersons

41-3010 Advertising Sales Agents

41-3020 Insurance Sales Agents

Manufacturing

41-2030 Retail Salespersons

41-3040 Travel Agents

Services

Promoters

41-9030 Sales Engineers

Service

43-2020 Telephone Operators

Operators

Clerks

43-3070 Tellers

43-4070 File Clerks

43-4150 Order Clerks

43-5030 Dispatchers

43-3010 Bill and Account Collectors

43-3020 Billing and Posting Clerks

43-3040 Gambling Cage Workers

43-3060 Procurement Clerks

43-4010 Brokerage Clerks

43-4020 Correspondence Clerks

43-4120 Library Assistants, Clerical

43-4140 New Accounts Clerks

43-4130 Loan Interviewers and Clerks

and Timekeeping

and Travel Clerks

43-5010 Cargo and Freight Agents

43-5020 Couriers and Messengers

43-5040 Meter Readers, Utilities

43-3050 Payroll and Timekeeping Clerks

43-3090 Miscellaneous Financial Clerks

43-4030 Court, Municipal, and License Clerks

43-4050 Customer Service Representatives

43-4080 Hotel, Motel, and Resort Desk Clerks

43-4170 Receptionists and Information Clerks

43-4110 Interviewers, Except Eligibility and Loan

43-4040 Credit Authorizers, Checkers, and Clerks

43-4060 Eligibility Interviewers, Government Programs

43-4160 Human Resources Assistants, Except Payroll

43-4180 Reservation and Transportation Ticket Agents

43-4190 Miscellaneous Information and Record Clerks

41-9040 Telemarketers

41-2010 Cashiers

39-9030 Recreation and Fitness Workers

39-3010 Gambling Services Workers

39-3020 Motion Picture Projectionists

Related Workers 39-4010 Embalmers and Crematory Operators

39-3030 Ushers, Lobby Attendants, and Ticket Takers

39-3090 Miscellaneous Entertainment Attendants and

39-4030 Morticians, Undertakers, and Funeral

39-5010 Barbers, Hairdressers, Hairstylists and

39-6010 Baggage Porters, Bellhops, and Concierges

39-9090 Miscellaneous Personal Care and Service

Sales and Related Occupations

41-1010 First-Line Supervisors of Sales Workers

41-2020 Counter and Rental Clerks and Parts

41-3030 Securities, Commodities, and Financial

41-3090 Miscellaneous Sales Representatives,

41-4010 Sales Representatives, Wholesale and

41-9010 Models, Demonstrators, and Product

41-9020 Real Estate Brokers and Sales Agents

43-1010 First-Line Supervisors of Office and

Administrative Support Workers

43-2010 Switchboard Operators, Including Answering

43-2090 Miscellaneous Communications Equipment

43-3030 Bookkeeping, Accounting, and Auditing

41-9090 Miscellaneous Sales and Related Workers

Office and Administrative Support

Occupations

Services Sales Agents

- 29-2030 Diagnostic Related Technologists and Technicians
- 29-2040 Emergency Medical Technicians and Paramedics
- 29-2050 Health Practitioner Support Technologists and Technicians
- 29-2060 Licensed Practical and Licensed Vocational Nurses
- 29-2070 Medical Records Specialists
- 29-2080 Opticians, Dispensing
- 29-2070 Medical Records Specialists
- 29-2080 Opticians, Dispensing
- 29-2090 Miscellaneous Health Technologists and Technicians
- 29-9020 Health Information Technologists and Medical Registrars
- 29-9090 Miscellaneous Health Practitioners and Technical Workers

Healthcare Support Occupations

- 31-1120 Home Health and Personal Care Aides
- 31-1130 Nursing Assistants, Orderlies, and
 - Psychiatric Aides
- 31-2010 Occupational Therapy Assistants and Aides
- 31-2020 Physical Therapist Assistants and Aides
- 31-9010 Massage Therapists
- 31-9090 Miscellaneous Healthcare Support Occupations

Protective Service Occupations

- 33-1010 First-Line Supervisors of Law Enforcement Workers
- 33-1020 First-Line Supervisors of Firefighting and
- Prevention Workers
- 33-1090 Miscellaneous First-Line Supervisors, Protective Service Workers
- 33-2010 Firefighters
- 33-2020 Fire Inspectors
- 33-3010 Bailiffs, Correctional Officers, and Jailers 33-3020 Detectives and Criminal Investigators
- 33-3030 Fish and Game Wardens
- 33-3040 Parking Enforcement Workers
- 33-3050 Police Officers
- 33-9010 Animal Control Workers
- 33-9020 Private Detectives and Investigators
- 33-9030 Security Guards and Gambling Surveillance
- Officers 33-9090 Miscellaneous Protective Service Workers

Food Preparation and Serving Related Occupations

- 35-1010 Supervisors of Food Preparation and Serving Workers 35-2010 Cooks 35-2020 Food Preparation Workers 35-3010 Bartenders
- 35-3020 Fast Food and Counter Workers
- 35-3030 Waiters and Waitresses
- 35-3040 Food Servers, Nonrestaurant
- 35-9010 Dining Room and Cafeteria Attendants and
- Bartender Helpers
- 35-9020 Dishwashers
- 35-9030 Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop
- 35-9090 Miscellaneous Food Preparation and Serving Related Workers

Building and Grounds Cleaning and Maintenance Occupations

- 37-1010 First-Line Supervisors of Building and Grounds Cleaning and Maintenance Workers
- 37-2010 Building Cleaning Workers
- 37-2020 Pest Control Workers
- 37-3010 Grounds Maintenance Workers

Personal Care and Service Occupations

- 39-1010 First-Line Supervisors of Entertainment and Recreation Workers
 39-1020 First-Line Supervisors of Personal Service
- Workers
- 39-2010 Animal Trainers39-2010 Animal Trainers

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51-8020 Stationary Engineers and Boiler Operators

System Operators

Blending Workers

51-9030 Cutting Workers

and Tenders

Weighers

Workers

Technicians

and Tenders

51-9120 Painting Workers

51-8030 Water and Wastewater Treatment Plant and

51-8090 Miscellaneous Plant and System Operators

51-9020 Crushing, Grinding, Polishing, Mixing, and

Compacting Machine Setters, Operators,

51-9010 Chemical Processing Machine Setters,

Operators, and Tenders

51-9040 Extruding, Forming, Pressing, and

51-9050 Furnace, Kiln, Oven, Drier, and Kettle

51-9060 Inspectors, Testers, Sorters, Samplers, and

Technicians and Medical Appliance

51-9110 Packaging and Filling Machine Operators

51-9140 Semiconductor Processing Technicians

Processing Machine Operators

Transportation and Material Moving

Occupations

53-1040 First-Line Supervisors of Transportation and

53-3010 Ambulance Drivers and Attendants, Except

Emergency Medical Technicians

53-3030 Driver/Sales Workers and Truck Drivers

53-3090 Miscellaneous Motor Vehicle Operators

Railroad Brake, Signal, and Switch

Operators and Locomotive Firers

53-4090 Miscellaneous Rail Transportation Workers

53-4010 Locomotive Engineers and Operators

53-4030 Railroad Conductors and Yardmasters

53-5020 Ship and Boat Captains and Operators

53-6090 Miscellaneous Transportation Workers

53-7050 Industrial Truck and Tractor Operators

53-7120 Tank Car, Truck, and Ship Loaders

55-1010 Military Officer Special and Tactical

55-2010 First-Line Enlisted Military Supervisors

Retired

55-3010 Military Enlisted Tactical Operations and

Air/Weapons Specialists and Crew Members

Operations Leaders

99-0001 Retired

53-7080 Refuse and Recyclable Material Collectors

Military Specific Occupations

53-7190 Miscellaneous Material Moving Workers

53-6030 Transportation Service Attendants

53-7010 Convevor Operators and Tenders

53-7020 Crane and Tower Operators

53-7040 Hoist and Winch Operators

53-7070 Pumping Station Operators

53-7060 Laborers and Material Movers

53-4040 Subway and Streetcar Operators

53-5010 Sailors and Marine Oilers

53-6010 Bridge and Lock Tenders

53-6050 Transportation Inspectors

53-6060 Passenger Attendants

53-5030 Ship Engineers

53-6020 Parking Attendants

53-6040 Traffic Technicians

53-7030 Dredge Operators

51-9160 Computer Numerically Controlled Tool

Operators and Programmers

51-9190 Miscellaneous Production Workers

Material Moving Workers

53-2010 Aircraft Pilots and Flight Engineers

53-2020 Air Traffic Controllers and Airfield

Operations Specialists

53-3050 Passenger Vehicle Drivers

53-2030 Flight Attendants

53-4020

51-9150 Photographic Process Workers and

51-9070 Jewelers and Precious Stone and Metal

Operators and Tenders

51-9080 Dental and Ophthalmic Laboratory

Office and Administrative Support Occupations (cont.)

- 43-5050 Postal Service Workers
- 43-5060 Production, Planning, and Expediting Clerks
- 43-5070 Shipping, Receiving, and Inventory Clerks 43-5110 Weighers, Measurers, Checkers, and Samplers,
- Recordkeeping
- 43-6010 Secretaries and Administrative Assistants
- 43-9020 Data Entry and Information Processing Workers 43-9030 Desktop Publishers
- 43-9040 Insurance Claims and Policy Processing Clerks
- 43-9050 Mail Clerks and Mail Machine Operators,
- Except Postal Service
- 43-9060 Office Clerks, General
- 43-9070 Office Machine Operators, Except Computer
- 43-9080 Proofreaders and Copy Markers
- 43-9110 Statistical Assistants
- 43-9190 Miscellaneous Office and Administrative Support Workers

Farming, Fishing, and Forestry Occupations

- 45-1010 First-Line Supervisors of Farming, Fishing, and Forestry Workers
- 45-2010 Agricultural Inspectors
- 45-2020 Animal Breeders
- 45-2040 Graders and Sorters, Agricultural Products
- 45-2090 Miscellaneous Agricultural Workers
- 45-3030 Fishing and Hunting Workers
- 45-4010 Forest and Conservation Workers
- 45-4020 Logging Workers

Construction and Extraction Occupations

- 47-1010 First-Line Supervisors of Construction Trades and Extraction Workers 47-2010 Boilermakers 47-2020 Brickmasons, Blockmasons, and Stonemasons 47-2030 Carpenters 47-2040 Carpet, Floor, and Tile Installers and Finishers 47-2050 Cement Masons, Concrete Finishers, and Terrazzo Workers 47-2060 Construction Laborers 47-2070 Construction Equipment Operators 47-2080 Drywall Installers, Ceiling Tile Installers, and Tapers 47-2110 Electricians 47-2120 Glaziers 47-2130 Insulation Workers 47-2140 Painters and Paperhangers 47-2150 Pipelayers, Plumbers, Pipefitters, and Steamfitters
- 47-2160 Plasterers and Stucco Masons
- 47-2170 Reinforcing Iron and Rebar Workers
- 47-2180 Roofers
- 47-2210 Sheet Metal Workers
- 47-2220 Structural Iron and Steel Workers
- 47-2230 Solar Photovoltaic Installers
- 47-3010 Helpers, Construction Trades
- 47-4010 Construction and Building Inspectors
- 47-4020 Elevator and Escalator Installers and Repairers
- 47-4030 Fence Erectors
- 47-4040 Hazardous Materials Removal Workers
- 47-4050 Highway Maintenance Workers
- 47-4060 Rail-Track Laying and Maintenance Equipment Operators
- 47-4070 Septic Tank Servicers and Sewer Pipe Cleaners 47-4090 Miscellaneous Construction and Related
- Workers
- 47-5010 Derrick, Rotary Drill, and Service Unit
- Operators, Oil and Gas 47-5020 Surface Mining Machine Operators and Earth
- Drillers 47-5030 Explosives Workers, Ordnance Handling
- Experts, and Blasters
- 47-5040 Underground Mining Machine Operators
- 47-5050 Rock Splitters, Quarry
- 47-5070 Roustabouts, Oil and Gas
- 47-5080 Helpers--Extraction Workers
- 47-5090 Miscellaneous Extraction Workers

Installation, Maintenance, and Repair Occupations

- 49-1010 First-Line Supervisors of Mechanics, Installers, and Repairers
- 49-2010 Computer, Automated Teller, and Office Machine Repairers
- 49-2020 Radio and Telecommunications Equipment Installers and Repairers
- 49-2090 Miscellaneous Electrical and Electronic Equipment Mechanics, Installers, and Repairers
- 49-3010 Aircraft Mechanics and Service Technicians
- 49-3020 Automotive Technicians and Repairers 49-3030 Bus and Truck Mechanics and Diesel Engine
- Specialists
- 49-3040 Heavy Vehicle and Mobile Equipment Service Technicians and Mechanics
- 49-3050 Small Engine Mechanics
- 49-3090 Miscellaneous Vehicle and Mobile Equipment Mechanics, Installers, and Repairers
- 49-9010 Control and Valve Installers and Repairers 49-9020 Heating, Air Conditioning, and Refrigeration Mechanics and Installers
- 49-9030 Home Appliance Repairers
- 49-9040 Industrial Machinery Installation, Repair, and
- Maintenance Workers
- 49-9050 Line Installers and Repairers
- 49-9060 Precision Instrument and Equipment Repairers
- 49-9070 Maintenance and Repair Workers, General
- 49-9080 Wind Turbine Service Technicians
- 49-9090 Miscellaneous Installation, Maintenance, and and Repair Workers

Production Occupations

- 51-1010 First-Line Supervisors of Production and Operating Workers
- 51-2010 Aircraft Structure, Surfaces, Rigging, and Systems Assemblers
- 51-2020 Electrical, Electronics, and Electromechanical Assemblers
- 51-2030 Engine and Other Machine Assemblers
- 51-2040 Structural Metal Fabricators and Fitters
- 51-2050 Fiberglass Laminators and Fabricators
- 51-2060 Timing Device Assemblers and Adjusters 51-2090 Miscellaneous Assemblers and Fabricators
- 51-2090 Miscellaneous Assemblers and Fabricators 51-3010 Bakers
- 51-3010 Bakers 51-3020 Butchers and Other Meat, Poultry, and Fish
- Processing Workers 51-3090 Miscellaneous Food Processing Workers
- 51-4020 Forming Machine Setters, Operators, and
- Tenders, Metal and Plastic 51-4030 Machine Tool Cutting Setters, Operators, and Tenders, Metal and Plastic
- 51-4040 Machinists
- 51-4050 Metal Furnace Operators, Tenders, Pourers, and
- Casters 51-4060 Model Makers and Pattern Makers, Metal and
- Plastic 51-4070 Molders and Molding Machine Setters,
- Operators, and Tenders, Metal and Plastic 51-4080 Multiple Machine Tool Setters, Operators, and
- Tenders, Metal and Plastic 51-4110 Tool and Die Makers
- 51-4120 Welding, Soldering, and Brazing Workers
- 51-4190 Miscellaneous Metal Workers and Plastic
- Workers
- 51-5110 Printing Workers

51-7020 Furniture Finishers

and Tenders

Dispatchers

- 51-6010 Laundry and Dry-Cleaning Workers 51-6020 Pressers, Textile, Garment, and Related Materials
- 51-6030 Sewing Machine Operators
- 51-6040 Shoe and Leather Workers
- 51-6050 Tailors, Dressmakers, and Sewers 51-6060 Textile Machine Setters, Operators, and Tenders

51-6090 Miscellaneous Textile, Apparel, and

51-7010 Cabinetmakers and Bench Carpenters

51-7030 Model Makers and Patternmakers, Wood

51-8010 Power Plant Operators, Distributors, and

51-7040 Woodworking Machine Setters, Operators,

Furnishings Workers

51-7090 Miscellaneous Woodworkers