DEPARTMENT OF		ILS COAST	COLIAR	D ALIXII IARV	/					
HOMELAND SECURITY							Flotilla			
U.S. COAST GUARD ANSC 7001 (04-21)	(2000)	ENROLLMENT APPLICATION See Privacy Act Statement on page 3 and Instructions on 10 thru 14							7	0 2
SECTION I - PERSONAL	AND DESCRIPTION OF THE PARTY OF			Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner,	011 10 011	411			Calendaria	
LAST NAME		RST NAME	impleted		-ULL MI	DIF	NAME		SU	IFFIX
SOCIAL SECURITY N	O. D.	ATE OF BIRT	H	GENDER		SPOUSE NAME				
MAILING ADDRESS				-		6-1	DIGIT O	CCUPAT	ION	CODE
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HOME			BUSIN	IESS	T		CE	ELL		
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Height:(inche	s) Weight:	Hair Co	olor:	Eye Cole	or:	V	Blood Ty	pe (if kn	own)	W
ETHNICITY (OPTION)	AL) White	or Caucasian	-	an Indian or Alaska r African Americar			oanic Ame an America	rican an or Pacifi	c Islar	nder
Who do you feel is re	esponsible fo	or recruiting	you into	the Auxiliary	? Name	Rok	ert Wi	tty 5000)444	<u> </u>
SECTION II - SKILLS BA	ANK INPUT - C	ompleted by	applicant						5 9 9 9	
A. Check appropriate answe	AND DESCRIPTION OF THE PARTY OF	NAME AND ADDRESS OF THE OWNER, WHEN PERSON NAMED AND ADDRESS OF TH	THE RESERVE OF THE PARTY OF	THE RESIDENCE OF THE PARTY OF T	ea?	□Y€	s 🗆 no	0	OTHER DESIGNATION OF THE PERSON OF THE PERSO	
		THE RESIDENCE OF THE PERSON NAMED IN COLUMN 1		administrative	missions?	☐ Ye	s n	0		
B. Select days/evenings ava Days \square Sun.	allable for CG sup Mon			☐ Wed.	П-	Γhu.	г	∃Fri.	_	Sat.
Nights Sun.	Mon	and the same of th		☐ Wed.		rnu. Γhu.] Fri.	Ė	Sat.
C. From the Skills Bank Coo	des (names 12-16	S) enter un to five	ekille that	vou nossess and	are willing t	o offer				
#1	#2	#3	P	#4	_	O Ollei		5		
									_	
SECTION III - EMERG	ENCY CONT			(Someone not	living wi	th you	u) - Com	pleted b	у ар	plicant
LAST NAME		FIRST	NAME		IVII	5	UFFIX	RE	LAH	JNSHIF
STREET ADDRESS			CITY	′			ST	ZIP +	4	
HOME			BUSI	INESS				CELL		
SECTION IV - FLOTIL	LA CERTIFIC	CATION AND	ATTACI	HMENTS - see	instruc	tions	Salvan SV			
☐ New Enrollment ☐		and seminated in confiction flower	and the same of the same	Name and Address of the Owner, Street or other Designation of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, which		T	TT	TT		
☐ New Member Exam				Score						
☐ Privacy Act Stateme	•			urse Certificate		J No				
Required Attachments: Fingerprint cards (2) Prior clearance document (see SEC X) Citizenship photocopy										
		opy (see SE								
FLOTILLA COMMAND		3	SIGNATU	IRE	to and the divine lines			DA	TE	
Gordon Hornby, FC										
NOTICE: The copy	of this form su	bmitted to DIR	AUX/SEC	CEN MUST HAV	E original	signa	tures an	d dates si	gned	in ink.

ANSC-7001 (04-21)	ENROLLMENT APPLICATION	Page 2 of 14						
SECTION V - APPLICANT INTERVIE	W RECORD - Completed by Interviewer							
INTERVIEWER CHECKS OFF EACH I ☐ What is The Auxiliary? - Persons interes yacht club. A service organization composions.	TEM AS DISCUSSED. ted in actively supporting the civilian component osed of volunteers with emphasis on active supp	of the U.S. Coast Guard. Not a ort of many Coast Guard mis-						
	☐ What Members Can Expect From The Auxiliary - Training, new skills, fellowship, public service. A sense of pride from							
	☐ What The Auxillary Expects From Members - Dedication, fellowship, public service, professional conduct and participa-							
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.								
Your Contribution to The Auxiliary - Spec	ns, other costs. (e.g., mileage and equipment) cial/professional skills, time, support of programs							
	rorable PSI may result in disenrollment. See PSI	Notice on page 3.						
SECTION VI - PARENT/GUARDIAN S								
ship in the United States Coast Guard	other legal guardian other than me/us and l/ Auxiliary.	we consent to his/her member-						
PARENT/GUARDIAN SIGNATURE	DATE							
SECTION VII - APPLICANT STATEM	ENT AND SIGNATURE - Completed by ap	plicant						
1. Are you currently serving as a member of the U.S. Armed Forces? Yes □ No □ If Yes, indicate branch: USA □ USN □ USMC □ USAF □ USCG □ If yes, indicate status: Active Duty □ Reserve □ National Guard □ Air National Guard □. 2. Have you ever served as a member of the U.S. Armed Forces in the past? Yes □ No □ If Yes, indicate branch: USA □ USN □ USMC □ USAF □ USCG □ 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 □ No □ 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 judical proceeding? Yes □ No □ 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 □ No □ 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								
SECTION VIII - DIRECTOR OF AUXII								
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. Note: If applicant is not accepted, explain in detail on a separate sheet of paper and attach								
NOTICE: The copy of this form submit	ted to DIRAUX/SECCEN MUST HAVE original sig	inatures and dates signed in ink.						

ANSC-7001 (04-21)				Page 3 of 14			
SECTION IX - VERIFICATION OF		- See instru	ctions				
SECTION A - To be filled cut by appl	icant:	- · · · · · ·					
I attest that I am (Check one of the fo	ollowing)						
A U.S. citizen or national by birth in the U.S. or U.S. territory/possession							
A U.S. citizen, but was not born in the U.S.							
SECTION B - To be completed by an							
or by a 🔲 Law Enforcement (LE) Off				see Section IV.			
☐ Birth Certificate showing that you							
FS-240 (Report of Birth Abroad	of a Citizen of the Ur	nited States) M	onth/Day/Year				
Explanation		<u>_</u> _					
FS-545 (Certificate of Birth-Fore							
DS-1350 (Certificate of Birth issu							
☐ A United States Passport (currer)			
Passport/Passport Card Number							
A Certificate of U.S. Citizenship							
_ CityState							
☐ A Certificate of Naturalization (IN							
Court City	_ State (Certificate #	Month/Day/Ye	ear			
AUXILIARY FT/CV NAME	EMPLID	SIGNATURE		DATE			
Donald Hershman	1229368			.			
LAW ENFORCEMENT OFFICER NAME	AGENCY & ID #		SIGNATURE	DATE			
				İ			
SECTION X - PRIOR/CURRENT (I EADANCE DETA	II S - Comple	atad by applicant - See in	etructione			
							
I have ☑ have not ☐ been issued a INSTRUCTIONS and complete page		by a rederal aç	gency within the past ten (10	years. If yes, SEE			
	εs υ, ο α σ.			 			
NOTES							
	· · · · · · · · · · · · · · · · · · ·						
		CT STATEME					
In accordance with 5 USC 552		g information	is provided to you when su	oplying personal			
information to the United State 1 AUTHORITY which authorized		he information	: 14 HSC Sec 922				
2. PRINCIPAL PURPOSE(S) for v				ity for enrollment			
and a record for the individual				ity for confountions			
THE ROUTINE USES which m	nay be made of the	information: P	rovide identification, addres	s and personal			
information to the following: (1)				•			
4. WHETHER OR NOT DISCLOS	SURE of such inforr	nation is man	datory or voluntary (require	d by law or op-			
tional) and the effects on the in	idividual, if any, of n	ot providing a	Il or any part of the request	ed information:			
Disclosure of this information is person in the Auxiliary.	s voluntary, but fallu	ire to provide i	information will prevent enro	ollment of the			
person in the Auxiliary.							
PERSO	NNEL SECURITY	INVESTIGAT	ION STATEMENT				
Agreement to undergo the req	uisite Personnel S	ecurity inves	tigation (PSI) is not a gua	rantee of mem-			
bership. An unfavorable PSI de	etermination may i	result in your	disenrollment despite an	y training, du-			
ties, activities you may have pe have expended as part of the A	errormed and/or po	ersonal inves	tments in time, effort, res	ources you may			
NOTICE: The copy of this form sub	mitted to DIRAUX/SE	CCEN MUST H	AVE original signatures and d	ates signed in Ink.			

ANSC-7001 (04-21)				E	NROL	LMEN	T APPL	ICATIO	DN	Page 4 of 14				
OFI FORM 86C Sentember 2001			SPE	CIAL	AGRE	EMEN	т сн	ECK (SA	(C)			OF PERSO		ANAGEMEN	NT
United States Coast G	oard - DHS		OP				OPM	1 Codes			Case Nun	iber			
Agreement: Number 1-2	004		ON	LY											
	AGE	NCY	USE O	NLY (CO	MPLET	E ITEMS	1 THRO	UGH 14 US	ING INS	TRUCTIONS	FROM T	HE BACK))		
1.SUBJECT'S FULL Lest Name	NAME			First Na				Middle N	ama (Su	fff-)	2, DATI Month	E OF BIRT	H ay	Year	
Last Hame				Fifst Na	ane			Middle	жшо (ош					#	
3. PLACE OF BIRT	TH (Use the	two le		do for the		tate		Country		·	4. SOCI	AL SECUE	UTY NU	MBER	
City	ŀ	Coun	ity		"	ILLUC		Country			İ				
5. OTHER NAMES	USED AND	DAT	ES WH	IEN USEI	- -			<u> </u>			L	L_			
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Name		\dashv		rom	+-	To	Nam	10			Fro	m	 	To	
				h Year	Mon	th Year		-			Month		N	fonth Year	
6. SEX (Mark one	box)		7. 8	SPECIAL	AGREE	MENT C	ODES	8.	POSITI	ON TITLE					
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☐ Male								- 1							
9. SON		\Box	10. SC	T T			11. IP	AC-ALC Nu	mber		12. Acc	ounting Date	a		
H S 1	0		H	S	1	0									
13. OTHER INFO	RMATION	REQU	JIRED	BY AGR	EEMEN	T									
a. CITIZENSHIP Mark the box at the	مامله	1		Tam a Ti	S citizen	or notions	al hy h istl	o in the II S	or 11 S to	rritory/possess	ion	- Answer ite	one h and	a	
that reflects your or	uncut	厅	=	T WH II O.	J. OHIZA	O number	<u>u 07 044</u>	1 til til 0.5.	<u>u u.s. m</u>	Thory/possess	щ.	- Allswei Ite	ans o anu	<u>u</u>	
citizenship status, a follow its instruction		μ	Ц	I am a U.	S. citizen	, but I was	NOT bo	m in the U.S	<u> </u>		/	Answer items	b, c, and	d	
								· · · · · · · · · · · · · · · · · · ·	:			<u> </u>	11 × 11		
(Code N) Bureau	n of Vital S	Stati	stics []Compl	ete all t	olocks as	s requir	ed.							
Mother's Full Name						Mother	🗷 Maideo	Name			Fathe	rii Full Nam	te		
b.															
(Code I) Complete							uestions i	n item 13 (c-	e) must be	answered. If	no response	is necessary	y or applic	able,	
indicate this on the form (for example, enter MoneLor (M/AC). c. UNITED STATES CITIZENSHIP If you are a U.S. Citizen, but were not born in the U.S., provide information about one or more of the following proofs of your															
Naturalization Certifi	icate (Where	were j	you nat												
Court			City			State	Certifi	cate Number				Month/Day/	Year Issue	xd	
Citizenship Certificate City	(Where was	the co	ertificat	te issued?)		State	Centifi	cate Number				Month/Day/	Vege Teens	d	
 ,						June	- Citali	CONT IVALIDO				Mumb Day/	1 Cai 15500	u	
State Department Form	m 240 □Repo			Abread of	a Citizer Explanat		tited Stat	es							
was prepared and give a		Day 1	ı can		Explanai	IOH									
explanation if needed. U.S. Passport															
This may be either a cu	urent or previ	ious U	.S. Pass	sport	Pas	ssport Nun	iber				Month/I	Day/Year Iss	ued		
d. DUAL CITIZENS									Count	try	·				
	coun	uy, pr	rovide tl	he name of	that cour	itry in the	space to t	the right.	1						!
								···							
14. Name and Title	of Requestin	ıg Ofi	ficial		Sign	sture of l	Requesti	eg Official		Telephone l	Number		Date		
ļ										()					

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.

ed (mm/dd/yyyy)	Date signed (mm/	nt legibly)	Full name (Type or print legibly)		ignature (Sign in ink)
curity Number	Social Security Nu				ther names used
ephone number	Home telephone r	ZIP Code	State	City (Country)	urrent street address Apt. #
ep	Home telep	ZIP Code	State	City (Country)	urrent street address Apt. #

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? ☐YES ☐ NO HAVE YOU HAD A BREAK IN FEDERAL SERVICE SINCE YOUR LAST BACKGROUND INVESTIGATION? ☐YES ☐ NO. IF YES PLEASE PROVIDE ALL BREAKS IN FEDERAL SERVICE DATE(S): I CERTIFY THAT ALL ABOVE ENTRIES ARE CORRECT TO THE BEST OF MY KNOWLEDGE. APPLICANT SIGNATURE DATE DIRAUX SIGNATURE DATE

Standard Form 86C Ravised July 2008 U.S. Office of Personnel Management 5 CFR Parts 731, 732, and 738

STANDARD FORM 86 CERTIFICATION (SF 86C)

Form approved: OMB No. 3208 0005 NSN 7540-01-500-4881 88-111

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 12868. 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.
- 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.
- 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.
- 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, 3208-0005, is currently valid. OPM may not collect this information, and you are not required to respond, unless this number is displayed.

ANSC-7001 (04-21)

ENROLLMENT APPLICATION

Page 8 of 14

Standard Form 86C Revised July 2008 U.S. Office of Personnel Managemen 5 CFR Parts 731, 732, and 738

STANDARD FORM 86 CERTIFICATION (SF 86C)

Form approved: OMB No. 3206 0005 NSN 7540-01-500-4881 88-111

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	l - Identifi	cation		승리 그는 물리가 되었다. 회사 사회를 잃고 하게 되고 있다.
	(last, first, mide			Social Security Number (SSN)
Date of birt	th (mm/dd/yyy)	y)	Place of birth (include City (Country) and S	State)
Work telep	hone number		Home telephone number	Е-таі
Block 2	- Questi	ons from the SF	*86	
INSTRU	CTIONS: T	he following Quest	ions correlate with your SF 86. If you rep	port no change to a Question, place an "X" in the No box. cplained 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 Activ	rity
		Question 24	. Use of Alcohol	
		Question 25	Investigations and Clearance Reco	rd
		Question 26	. Financial Record	
		Question 27	. Use of Information Technology Sys	items
		Question 28	Involvement in Non-Criminal Court	Actions

ANSC-7001 (04-21)

ENROLLMENT APPLICATION

Page 9 of 14

Standard Form 86C Revised July 2008

STANDARD FORM 86 CERTIFICATION

Form approved: OMB No. 3206 0005

U.S. Office of Personnel Management	(SF 86C)	NSN 7540-01-500-4881
5 CFR Parts 731, 732, and 738	• • •	88-111
Diods 2 Euplemations/Demarks		
Block 3 - Explanations/Remarks	E. the SE 06 Question number consisted with w	was an average of the bare had
a change of residence, write "Question 11" an	fy the SF 86 Question number associated with you dist your new address.	our answer. For example, il you nave nad
		
	 	
		
	<u> </u>	
Check this block if additional comments a	are attached. Place your name and SSN at the to	op of each page.
Check this block if your SF 86 is attached	i.	
Block 4 - Certification		
explained under Block 3. My statements on t knowledge and belief and are made in good t by fine or imprisonment or both (18 U.S.C. 100	all changes to my most recent SF 86 or since rethis form, and on any attachments to it, are true faith. I understand that a knowing and willful falset). I understand that intentionally withholding, mince, employment prospects, or job status up to ment from Federal service.	e, complete, and correct to the best of my se statement on this form can be punished isrepresenting, or falsifying information will
Signature (Sign in Ink)		Date (mm/dd/yyyy)
Enter second and the	novelle Newbox home	
	ecurity Number here	
Page 2		

- 1. GENERAL 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. FLOTILLA NUMBER 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. SECTION I PERSONAL DATA OF APPLICANT 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
 - STATE-Use the official two-letter postal code. Leave blank if cutside the United States.
 - j. ZIP+4-Enter the fuil 9 digit ZIP code. Leave blank if outside the United States.
 k. EMAIL 1 Enter primary email address if available.
 l. 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
 - n. ID CARD INFORMATION Enter your height in inches, weight, hair color, eye color and blood type (if known). (See 1c above).
 - o. ETHNICITY (Optional) Check box which describes your ethnic group.
 - p. RECRUITER Enter the name of the person you feel is responsible for your recrutiment.
- 4. SECTION II SKILLS BANK INPUT 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. SECTION III EMERGENCY CONTACT INFORMATION (Someone not living with you) To be completed by

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

- 6. SECTION IV 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

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

- b. Interviewer prints name, signs and dates.
- 8. SECTION VI 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.
- 10. <u>SECTION VIII</u> 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. SECTION X - 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. NOTES 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.

- Your full name must be given. If you are a "Jr.", "Sr.", "Ill", 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".
- 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	Tonnessee	TN
Arizona	AZ	Illinois	íL.	Minnesota	MN	North Carolina	NC	Texas	TX
Arkansas	AR	indiana	(N	Mississippi	MS	North Dakota	ND	Uteh	UT
California	CA	lowa	IA	Missouri	MO	Ohio	OH	Vermont	VT
Colorado	co	Kansas	KS	Montana	MT	Oklahoma	ОК	Virginia	VA
Connecticut	CT	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 Samos	AS	District of Columbia	DC	Guam	GU	Northern Mariana Island	CM	Puerto Rico	PR
Trust Tarritory	777	Virnin lelende	M						

4. Provide your Social Security Number.

- 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
- 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.
 - 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 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

	Management Occupations
11-1010	Chief Executives
11-1020	General and Operations Managers
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
	Computer and Information Systems Managers
11-3030	Financial Managers
11-3050	Industrial Production Managers
	Purchasing Managers
11-3070	Transportation, Storage, and Distribution
	Managers
	Compensation and Benefits Managers
	Human Resources Managers
	Training and Development Managers
11-9010	Farmers, Ranchers, and Other Agricultural
	Managers
	Construction Managers
	Education and Childcare Administrators
	Architectural and Engineering Managers
	Food Service Managers
	Entertainment and Recreation Managers
	Lodging Managers
	Medical and Health Services Managers
	Natural Sciences Managers
	Postmasters and Mail Superintendents
11 -9 140	Property, Real Estate, and Community
	Association Managers
	Social and Community Service Managers
	Emergency Management Directors
11-9170	Personal Service Managers

Bu	siness 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
	Management Analysts
13-1120	Meeting, Convention, and Event Planners
13-1130	Fundralsers

11-9190 Miscellaneous Managers

13-1140 Compensation, Benefits, and Job Analysis Specialists 13-1150 Training and Development Specialists

13-1160 Market Research Analysts and Marketing **Specialists**

13-1190	Miscellaneous Business Operations Specialists
13-2010	Accountants and Auditors
13-2020	Property Appraisers and Assessors
13-2030	Budget Analysts
13-2040	Credit Analysts
13-2050	Financial Analysts and Advisors
13-2060	Financial Examiners

13-2070 Credit Counsalors and Loan Officers 13-2080 Tax Examiners, Collectors and Preparers, and Revenue Agents

13-2090	Miscellaneous Financial Specialists
Сотр	uter 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

7-2040	Chemical Engineers
7-2050	Civil Engineers
7-2060	Computer Hardware Engineers
7-2070	Electrical and Electronics Engineers
7-2080	Environmental Engineers
7-2110	Industrial Engineers, Including Health and
	Safety
7_2120	Marina Engineers and Navel Architects

17-2020 Agricultural Engineers 17-2030 Bloengineers and Blomedical Engineers

Photogrammetrists 17-2010 Aerospace Engineers

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 Drafts** 17-3030 Surveying and Mapping Technicians

Life, Physical, and Social Science **Occupations**

19-1010 Agricultural and Food Scientists 19-1020 Biological Scientists 19-1030 Conservation Scientists and Foresters 19-1040 Medical Scientis 19-1090 Miscellaneous Life Scientists 19-2010 Astronomers and Physicists 19-2020 Atmospheric and Space Scientists 19-2030 Chemists and Materials Scientists 19-2040 Environmental Scientists and Geoscientists 19-2090 Miscellaneous Physical Scientists 19-3010 Economists 19-3020 Survey Researchers 19-3030 Psychologists 19-3040 Sociologists 19-3050 Urban and Regional Planners 19-3090 Miscellaneous Social Scientists and Related Workers 19-4010 Agricultural and Food Science Technicians 19-4020 Biological Technicians 19-4030 Chemical Technicians 19-4040 Environmental Science and Geoscience Technicians 19-4050 Nuclear Technicians 19-4060 Social Science Research Assistants 19-4070 Forest and Conservation Technicians 19-4090 Miscellaneous Life, Physical, and Social Science Technicisms 19-5010 Occupational Health and Safety Specialists and Technicians

Community and Social Service

	Occupations
21-1010	Counselors
21-1020	Social Workers
21-1090	Miscellaneous Community and Social
	Service Specialists
21-2010	Clergy
21-2020	Directors, Religious Activities and Education
21-2090	Miscellaneous Religious Workers
	-

Legal Occupations

23-1010 Lawyers and Judicial Law Clerks 23-1020 Judges, Magistrates, and Other Judicial Workers 23-2010 Paralegals and Legal Assistants

23-2090 Miscellaneous Legal Support Workers

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	00 0000 Planatia Palata Palata	20 2020 Animal Constitution
Educational Instruction and	29-2030 Diagnostic Related Technologists and Technicians	39-2020 Animal Caretakers 39-3010 Gambling Services Workers
Library Occupations	29-2040 Emergency Medical Technicians and	39-3020 Motion Picture Projectionists
25-1010 Business Teachers, Postsecondary	Paramedics	39-3030 Ushers, Lobby Attendants, and Ticket Takers
25-1020 Math and Computer Science Teachers, Postsecondary	29-2050 Health Practitioner Support Technologists and Technicians	39-3090 Miscellaneous Entertainment Attendants and Related Workers
25-1030 Engineering and Architecture Teachers, Postsecondary	29-2060 Licensed Practical and Licensed Vocational Nurses	39-4010 Embalmers and Crematory Operators 39-4020 Funeral Attendants
25-1040 Life Sciences Teachers, Postsecondary	29-2070 Medical Records Specialists	39-4030 Morticians, Undertakers, and Funeral
25-1050 Physical Sciences Teachers, Postsecondary 25-1060 Social Sciences Teachers, Postsecondary	29-2080 Opticians, Dispensing	Arrangers
25-1070 Health Teachers, Postsecondary	29-2070 Medical Records Specialists 29-2080 Opticians, Dispensing	39-5010 Barbers, Hairdressers, Hairstylists and Cosmetologists
25-1080 Education and Library Science Teachers, Postsecondary	29-2090 Miscellaneous Health Technologists and Technicians	39-5090 Miscellaneous Personal Appearance Workers
25-1110 Law, Criminal Justice, and Social Work Teachers, Postsecondary	29-9020 Health Information Technologists and Medical Registrars	39-6010 Baggage Porters, Bellhops, and Conclerges 39-7010 Tour and Travel Guides
25-1120 Arts, Communications, History, and	29-9090 Miscellaneous Health Practitioners and	39-9010 Childcare Workers
Humanities Teachers, Postsecondary 25-1190 Miscellaneous Postsecondary Teachers	Technical Workers	39-9030 Recreation and Fitness Workers
25-2010 Preschool and Kindergarten Teachers		39-9040 Residential Advisors 39-9090 Miscellaneous Personal Care and Service
25-2020 Elementary and Middle School Teachers	Healthcare Support Occupations	Workers
25-2030 Secondary School Teachers 25-2050 Special Education Teachers	31-1120 Home Health and Personal Care Aides	Salar and Dalated Occurations
25-3010 Adult Basic Education, Adult Secondary	31-1130 Nursing Assistants, Orderlies, and	Sales and Related Occupations
Education, and English as a Second Language	Psychiatric Aides 31-2010 Occupational Therapy Assistants and Aides	41-1010 First-Line Supervisors of Sales Workers 41-2010 Cashlers
25-3020 Self-Enrichment Teachers 25-3030 Substitute Teachers, Short-Term	31-2020 Physical Therapist Assistants and Aides	41-2020 Counter and Rental Clerks and Parts
25-3030 Substitute Teachers, Short-Term 25-3040 Tutors	31-9010 Massage Therapists	Salespersons
25-3090 Miscellaneous Teachers and Instructors	31-9090 Miscellaneous Healthcare Support Occupations	41-2030 Retail Salespersons
25-4010 Archivists, Curators, and Museum Technicians		41-3010 Advertising Sales Agents 41-3020 Insurance Sales Agents
25-4020 Librarians and Media Collections Specialists 25-4030 Library Technicians	Protective Service Occupations	41-3030 Securities, Commodities, and Financial
25-9020 Farm and Home Management Educators	33-1010 First-Line Supervisors of Law Enforcement	Services Sales Agents
25-9030 Instructional Coordinators	Workers	41-3040 Travel Agents
25-9040 Teaching Assistants	33-1020 First-Line Supervisors of Firefighting and	41-3090 Miscellaneous Sales Representatives, Services
25-9090 Miscellaneous Educational Instruction and Library Workers	Prevention Workers 33-1090 Miscellaneous First-Line Supervisors, Protective	41-4010 Sales Representatives, Wholesale and
	Service Workers	Manufacturing
Arts, Design, Entertainment, Sports,	33-2010 Firefighters	41-8010 Models, Demonstrators, and Product Promoters
and Media Occupations	33-2020 Fire Inspectors 33-3010 Balliffs, Correctional Officers, and Jailers	41-9020 Real Estate Brokers and Sales Agents
27-1010 Artists and Related Workers	33-3020 Detectives and Criminal Investigators	41-8030 Sales Engineers
27-1020 Designers	33-3030 Fish and Game Wardens	41-9040 Telemarketers 41-9090 Miscellaneous Sales and Related Workers
27-2010 Actors, Producers, and Directors	33-3040 Parking Enforcement Workers 33-3050 Police Officers	41-000 Milliothia Model Cales and Related Workers
27-2020 Athletes, Coaches, Umpires, and Related Workers	33-9010 Animal Control Workers	Office and Administrative Support
27-2030 Dancers and Choreographers	33-9020 Private Detectives and investigators	Occupations
27-2040 Musicians, Singers, and Related Workers	33-9030 Security Guards and Gambling Surveillance Officers	43-1010 First-Line Supervisors of Office and
27-2090 Miscellaneous Entertainers and Performers, Sports and Related Workers	33-9090 Miscellaneous Protective Service Workers	Administrative Support Workers 43-2010 Switchboard Operators, Including Answering
27-3010 Broadcast Announcers and Radio Disc Jockeys		Service
27-3020 News Analysts, Reporters and Journalists	Food Preparation and Serving	43-2020 Telephone Operators
27-3030 Public Relations Specialists 27-3040 Writers and Editors	Related Occupations	43-2090 Miscellaneous Communications Equipment Operators
27-3090 Miscellaneous Media and Communication	35-1010 Supervisors of Food Preparation and Serving	43-3010 Bill and Account Collectors
Workers	Workers	43-3020 Billing and Posting Clerks
27-4010 Broadcast, Sound, and Lighting Technicians 27-4020 Photographers	35-2010 Cooks 35-2020 Food Preparation Workers	43-3030 Bookkeeping, Accounting, and Auditing Clarks
27-4030 Television, Video, and Film Camera Operators	35-3010 Bartenders	43-3040 Gambling Cage Workers
and Editors	35-3020 Fast Food and Counter Workers	43-3050 Payroll and Timekeeping Clerks
27-4090 Miscellaneous Media and Communication Equipment Workers	35-3030 Waiters and Waitresses 35-3040 Food Servers, Nonrestaurant	43-3060 Procurement Clerks 43-3070 Tellers
	35-9010 Dining Room and Cafeteria Attendants and	43-3090 Miscellaneous Financial Clerks
Healthcare Practitioners and Technical	Bartender Helpers	43-4010 Brokerage Clerks
Occupations	35-9020 Dishwashers 35-9030 Hosts and Hostesses, Restaurant, Lounge, and	43-4020 Correspondence Clerks 43-4030 Court, Municipal, and License Clerks
29-1010 Chiropractors	Coffee Shop	43-4040 Credit Authorizers, Checkers, and Clerks
29-1020 Dentists 29-1030 Dietitians and Nutritionists	35-9090 Miscellaneous Food Preparation and Serving	43-4050 Customer Service Representatives
29-1040 Optometrists	Related Workers	43-4080 Eligibility Interviewers, Government Programs 43-4070 File Clerks
29-1050 Pharmacists	Puilding and Crounds Classics	43-4080 Hotel, Motel, and Resort Desk Clerks
29-1070 Physician Assistants 29-1080 Podiatrists	Building and Grounds Cleaning	43-4110 Interviewers, Except Eligibility and Loan
29-1120 Therapists	and Maintenance Occupations 37-1010 First-Line Supervisors of Building and Grounds	43-4120 Library Assistants, Clerical 43-4130 Loan Interviewers and Clerics
29-1130 Veterinarians	Cleaning and Maintenance Workers	43-4140 New Accounts Clerks
29-1140 Registered Nurses 29-1150 Nurse Anesthetists	37-2010 Building Cleaning Workers	43-4150 Order Clerks
29-1160 Nurse Midwives	37-2020 Pest Control Workers	43-4160 Human Resources Assistants, Except Payroll and Timekeeping
29-1170 Nurse Practitioners	37-3010 Grounds Maintenance Workers	43-4170 Receptionists and Information Clerks
29-1180 Audiologists 29-1210 Physicians	Personal Care and Service Occupations	43-4180 Reservation and Transportation Ticket Agents
29-1240 Surgeons	39-1010 First-Line Supervisors of Entertainment and	and Travel Clerks 43-4190 Miscellaneous Information and Record Clerks
29-1290 Miscellaneous Healthcare Diagnosing or Treating	Recreation Workers	43-5010 Cargo and Freight Agents
Practitioners 29-2010 Clinical Laboratory Technologists and Technicians	39-1020 First-Line Supervisors of Personal Service Workers	43-5020 Couriers and Messengers
Technologists and Technicians	workers 39-2010 Animal Trainers39-2010 Animal Trainers	43-5030 Dispatchers 43-5040 Meter Readers, Utilities

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Office	and Administrative Support		Untion Mointenance and Danel	£1_8020	Stationary Engineers and Boiler Operators
Onice	Occupations (cont.)	Insta			Water and Wastewater Treatment Plant and
43-5050	Postal Service Workers	49-1010	Flord 1.15 - 1 Community	E4 0000	System Operators
43-5060	Production, Planning, and Expediting Clerks		and Repairers	51-8010	Miscellaneous Plant and System Operators Chemical Processing Machine Setters,
	Shipping, Receiving, and Inventory Clerks Weighers, Measurers, Checkers, and Samplers,	49-2010	Computer, Automated Teller, and Office		Operators, and Tenders
40-0110	Recordkeeping	49-2020	Radio and Telecommunications Equipment	51-9020	Crushing, Grinding, Polishing, Mixing, and Blending Workers
	Secretaries and Administrative Assistants		Installers and Repairers	51-9030	Cutting Workers
	Data Entry and Information Processing Workers Desktop Publishers	49-2090	Miscellaneous Electrical and Electronic Equipment Mechanics, Installers, and Repairers		Extruding, Forming, Pressing, and
43-9040	Insurance Claims and Policy Processing Clerks		Aircraft Mechanics and Service Technicians		Compacting Machine Setters, Operators, and Tenders
43-9050	Mail Clerks and Mail Machine Operators,	49-3020	Automotive Technicians and Repairers Bus and Truck Mechanics and Diesel Engine	51-9050	Furnace, Kiln, Oven, Drier, and Kettle
43-9060	Except Postal Service Office Clerks, General	49-3030	Oncelolisto	E4 0000	Operators and Tenders
43-9070	Office Machine Operators, Except Computer	49-3040	Heavy Vehicle and Mobile Equipment Service	31-9000	Inspectors, Testers, Sorters, Samplers, and Weighers
	Proofreaders and Copy Markers Statistical Assistants	40.3050	Technicians and Mechanics Small Engine Mechanics	51 -9 070	Jewelers and Precious Stone and Metal
	Miscellaneous Office and Administrative		Missollanaeus Mahiela and Mahila Esulament	51 <u>.0080</u>	Workers Dental and Ophthalmic Laboratory
	Support Workers	40.0040	Mechanics, Installers, and Repairers	0. 0000	Technicians and Medical Appliance
	Farming, Fishing, and Forestry		Control and Valve installers and Repairers Heating, Air Conditioning, and Refrigeration	54 0440	Technicians
	Occupations		Mechanics and installers	51 -8 110	Packaging and Filling Machine Operators and Tenders
4E 4040	•		Home Appliance Repairers Industrial Machinery Installation, Repair, and		Painting Workers
45-1010	First-Line Supervisors of Farming, Fishing, and Forestry Workers	10-0010	Maintenance Workers		Semiconductor Processing Technicians Photographic Process Workers and
	Agricultural Inspectors		Line Installers and Repairers	31-0130	Processing Machine Operators
	Animal Breeders Graders and Sorters, Agricultural Products		Precision Instrument and Equipment Repairers Maintenance and Repair Workers, General	51-9160	Computer Numerically Controlled Tool
	Miscellaneous Agricultural Workers		Wind Turbine Service Technicians	51_0100	Operators and Programmers Miscellaneous Production Workers
	Fishing and Hunting Workers	4 9-8 090	Miscellaneous Installation, Maintenance, and		
	Forest and Conservation Workers Logging Workers		and Repair Workers	Tran	sportation and Material Moving
			Production Occupations		Occupations
(Construction and Extraction	51-1010	First-Line Supervisors of Production and	53-1040	First-Line Supervisors of Transportation and Material Moving Workers
	Occupations	E4 2040	Operating Workers Aircraft Structure, Surfaces, Rigging, and	53-2010	Aircraft Pilots and Flight Engineers
47-1010	First-Line Supervisors of Construction Trades and Extraction Workers	31-2010	Systems Assemblers		Air Traffic Controllers and Airfield
47-2010	Bollermakers	51-2020	Electrical, Electronics, and Electromechanical	53,2030	Operations Specialists Flight Attendants
	Brickmasons, Blockmasons, and Stonemasons	51_2030	Assemblers Engine and Other Machine Assemblers		Ambulance Drivers and Attendants, Except
	Carpenters Carpet, Floor, and Tile Installers and Finishers		Structural Metal Fabricators and Fitters	E0 0000	Emergency Medical Technicians
	Cement Masons, Concrete Finishers, and		Fiberglass Laminators and Fabricators		Driver/Sales Workers and Truck Drivers Passenger Vehicle Drivers
47 0000	Terrazzo Workers		Timing Device Assemblers and Adjusters Miscellaneous Assemblers and Fabricators	53-3090	Miscellaneous Motor Vehicle Operators
	Construction Laborers Construction Equipment Operators	51-3010	Bakers		Locomotive Engineers and Operators Reilroad Brake, Signal, and Switch
	Drywall Installers, Ceiling Tile Installers, and	51-3020	Butchers and Other Meat, Poultry, and Fish Processing Workers	55-4020	Operators and Locomotive Firers
47 2440	Tapers Electricians	51-3090	Miscellaneous Food Processing Workers		Railroad Conductors and Yardmasters
	Glaziers	51-4020	Forming Machine Setters, Operators, and		Subway and Streetcar Operators Miscellaneous Rail Transportation Workers
	Insulation Workers	51-4030	Tenders, Metal and Plastic Machine Tool Cutting Setters, Operators, and	53-5010	Sailors and Marine Oilers
	Painters and Paperhangers Pipelayers, Plumbers, Pipelitiers, and		Tenders, Metal and Plastic		Ship and Boat Captains and Operators Ship Engineers
	Steamfitters		Machinists Metal Furnace Operators, Tenders, Pourers, and		Bridge and Lock Tenders
	Plasterers and Stucco Masons	51-1050	Casters		Parking Attendants
	Reinforcing Iron and Rebar Workers Roofers	51-4060	Model Makers and Pattern Makers, Metal and		Transportation Service Attendants Traffic Technicians
	Sheet Metal Workers	51-4070	Plastic Molders and Molding Machine Setters,	53-6050	Transportation Inspectors
	Structural Iron and Steel Workers Solar Photovottalc Installers		Operators, and Tenders, Metal and Plastic		Passenger Attendants Miscellaneous Transportation Workers
47-3010	Helpers, Construction Trades	51-4080	Multiple Machine Tool Setters, Operators, and Tenders, Metal and Plastic		Conveyor Operators and Tenders
	Construction and Building Inspectors	51-4110	Tool and Die Makers	53-7020	Crane and Tower Operators
	Elevator and Escalator Installers and Repairers Fence Erectors		Welding, Soldering, and Brazing Workers		Dredge Operators Hoist and Winch Operators
	Hazardous Materials Removal Workers	51-4190	Miscellaneous Metal Workers and Plastic Workers	53-7050	Industrial Truck and Tractor Operators
	Highway Maintenance Workers Rail-Track Laying and Maintenance Equipment		Printing Workers		Laborers and Material Movers Pumping Station Operators
	Operators		Laundry and Dry-Cleaning Workers Pressers, Textile, Garment, and Related		Refuse and Recyclable Material Collectors
	Septic Tank Servicers and Sewer Pipe Cleaners	51-0020	Materials		Tank Car, Truck, and Ship Loaders
T1 ~1080	Miscellaneous Construction and Related Workers		Sewing Machine Operators	DJ-/190	Miscellaneous Material Moving Workers
47-5010	Derrick, Rotary Drill, and Service Unit		Shoe and Leather Workers Tailors, Dressmakers, and Sewers		Military Specific Occupations
47-5020	Operators, Oil and Gas Surface Mining Machine Operators and Earth		Textile Machine Setters, Operators, and	55-1010	Military Officer Special and Tactical
	Drillers	51-6000	Tenders Miscellaneous Textile, Apparel, and	55-2010	Operations Leaders First-Line Enlisted Military Supervisors
47-5030	Explosives Workers, Ordnance Handling Experts, and Blasters		Furnishings Workers		Military Enlisted Tactical Operations and
	Underground Mining Machine Operators		Cabinetmakers and Bench Carpenters		Air/Weapons Specialists and Crew Members
	Rock Splitters, Quarry		Furniture Finishers Model Makers and Patternmakers, Wood		
	Roustabouts, Oil and Gas Helpers-Extraction Workers		Woodworking Machine Setters, Operators,		Retired
	Miscellaneous Extraction Workers	51-7090	and Tenders Miscellaneous Woodworkers	00.0004	
			Power Plant Operators, Distributors, and	89-0001	rvon 60
			Dispatchers		