

HUMAN RESOURCES DIVISION 578 North Marine Corp Drive Tumon, Guam 96931

Phone: (671) 647-7855/1340 Fax: (671) 649-0369

PPLICATIONS OCUMENTS:	WILL	NOT B	E ACCEPTED	WITHOUT	THE	FOLLOWING
			EDUCATIO	V	340	
High School	Diploma					
GED						
College Trans	script					
			MILITARY			
DD-214						
	PI	REFERE	NCE POINTS -	DISABILIT	Y	
Letter from t	he U.S. V	Veteran's	Administration			
Letter from t	he Veter	an's Affai	rs			
Certification le	tter from	Departme	nt of Public Health	and Social Serv	rices	
		PR	EFERENTIAL	HIRE		
Eligibility lett	ter from	the Unive	rsity of Guam Fi	nancial Aid O	ffice	
		W	ORK ELIGIBI	LITY		
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Government of	Guam I.	D., Driver'	s License, Other P	roof of Work E	ligibility	•
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Guam Enviro	nmenta		n Agency Certifi	ALIGNA CANADA IN CANADA	ition))
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CEIVED BY:				DAT	Œ:	

GOVERNMENT OF GUAM

EMPLOYMENT APPLICATION

Revised: 2/06

GENERAL INSTRUCTIONS & INFORMATION

SUBMITTING YOUR APPLICATION

Complete this application by printing in black/blue ink or typing. If additional space is needed, continue on item #12, or a separate sheet(s) may be attached. If you wish to submit a RESUME, your resume must contain all of the required information under item #11, Work Experience Section, for each work described. Resumes not in compliance may be considered incomplete. WE WILL ONLY ACCEPT APPLICATIONS ORIGINALLY FORMATTED BY THE GOVERNMENT OF GUAM. You must submit an application for each currently announced position you are applying for with your original signature. Your application is non-transferable. All applications being submitted must comply with the deadline stated on the JOB ANNOUNCEMENT.

RATING PROCESS

The contents of the employment application and other substantiating documents will be thoroughly reviewed to determine if you meet the minimum qualification requirements of the position. Under the Work Experience Section, item #11, be sure to include all your work experience in order to help us evaluate your qualifications. Volunteer work and employment in the military service on a part-time basis as well as work experience in a detailed capacity will be credited based on their own merits. You maybe rated ineligible if you do not provide sufficient information and/or supporting documents. Submission of new information on education and/or work experience after an eligibility list is established is generally prohibited, exceptions maybe based upon a valid appeal. You must sign and date your application. In addition, you must fill out, sign and date the "Suitability Determination" form. Failure to fill out, sign & date in these two areas will result in your application being rejected.

NOTIFICATION OF RESULTS

Your employment application is part of an examination process. Your employment application will be evaluated and rated. An incomplete employment application will result in an ineligible rating. You may be scheduled for additional examinations depending on the position requirements. The results will be mailed to you. IT IS YOUR RESPONSIBILITY TO INFORM THIS OFFICE OF ANY CHANGES TO YÔUR ADDRESS OR TELEPHONE NUMBER.

REQUIRED DOCUMENTS

To validate credentials you may claim, (e.g. High School Diploma, College Transcript, DD-214), an original or certified copy of the document(s) must accompany the application. Failure to provide proof may result in your disqualification. Refer to the specific job announcement for all required documents needed. If selected, you will be required to submit recent Police & Court Clearances.

HANDBOOKS AND STUDY GUIDES

An Applicant Handbook describing the application process and Study Guides for most examinations are available upon request at the Department of Administration, Human Resources Division or the respective department or agency.

U.S. MILITARY PREFERENCE POINTS

As a member of the Armed Forces of the United States or the Guam Police Combat Patrol, you are entitled to claim five preference points, if you have completed at least 180 consecutive days of active duty and received an honorable discharge. To claim the points, you must fill out a "Preference Points" request form and provide your DD-214 Member 4, which indicates your service dates and character of service. To claim an additional five (5) points for disability, you must provide a letter from the U.S. Veteran's Administration or the Department of Veteran's Affairs, which specifically states that you are entitled to Civil Service Preference for a service connected disability. If eligible for any of the preference points, the points will be added to your passing final earned rating. Preference points are only awarded for initial employment.

PREFERENCE POINTS FOR PERSONS WITH DISABILITIES

OR

As a person with a disability, you are entitled to claim five preference points, if you are certified with a disability. To claim the points, you must fill out a "Preference Points" request form and provide a certification letter from the Department of Public Health and Social Services. Preference points are only awarded for initial employment.

PREFERENTIAL HIRE STATUS

As a recipient of a educational loan or merit scholarship, you are entitled to first offer of employment in accordance with Public Law 15-127, (notwithstanding any other laws which my supercede). To claim preferential hire, you must submit your eligibility letter from the University of Guam Financial Aid Office, along with your job application. Preference hiring is only awarded for initial employment. In addition, declining an offer will result in the removal of preferential hire status.

WORK ELIGIBILITY UPON SELECTION

U.S. citizens may apply for all government of Guam jobs. Non U.S. citizens, such as U.S. Permanent Residents, citizens of the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau may apply for employment in MOST GovGuam jobs. Please consult the job announcement for any specific requirement. Public Law 99-603 (8 USC Section 1324A) requires the government of Guam to verify your identity and work eligibility. When offered a position, you will be required to provide proof of identity and eligibility for employment in the United States. The following are valid documents of proof, one document from column A, **OR** one document each under column B AND

	COLUMN A
•	U.S. Passport
•	Naturalization Card

AND COLUMN B Government of Guam I.D. Card

Driver's License Other Proof of Work Eligibility

COLUMN C 'Green Card Original Social Security Card

EMPLOYMENT APPLICATION



GOVERNMENT OF GUAM

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

OFFICIAL USE ONLY - REQUIRED DOCUMENTS Accepted By (Print Name & Initial):

Date:	_ Age	ncy Applie	d For:	
Driver's License		Y	N	N/A
Type: State:		Exp. Da	te:	
H.S. Diploma/GED	Y	N	N/A	
College Transcript		Y	N	N/A
Police Clearance		Y	N	N/A
Court Clearance		Y	N	N/A
Other:		Y	N	N/A
APPLICATION #:		OS	#:	

<u>APPLICATION INSTRUCTIONS</u>: Give full and complete information. For questions, which do not apply to you, please write "N/A" (Not Applicable). Your Social Security Number is necessary to maintain proper identification of your records. Refer to the page entitled "GENERAL INSTRUCTIONS & INFORMATION" for further information.

1.	1. POSITION APPLIED FOR:			2. JOB ANNOUNCEMENT NO.: 3. LOWEST SALARY ACCEPTABLE:						
4.	NAME: Last F	irst		Mic	Middle 5. SOCIAL SECURITY NO		RITY NO.:			
6.	MAILING ADDRESS: P.O. Box or Street Name					City	Sta	ate	Zip Code	
7.	HOME ADDRESS: Street Name					City	Sta	ate	Zip Code	
8.	TELEPHONE NO.: Home:		Work:				Fax:		E-Mail:	
9.	EDUCATION: Please check and incomplete and incomple	E.D. – School:					Year Gradua Year Gradu 10th 11			
		Dates of At	tendance	è	Credit Hrs. (Completed				
	Name and Location of College/University	From	То		Sem.	Qtr.	Course	of Study	Type of Degree	Year Earned
			· · · · · · · · · · · · · · · · · · ·							
	Major Undergraduate Courses	Sem. Hrs.	Qtr. H	írs.	Ma	jor Gradı Cou	uate College rses		Sem. Hrs.	Qtr. Hrs.
2.56							*			
10.	LIST MANUALS, EQUIPMENT, LIC	CENSES, SPECIAL	TRAIN	ING, A	ND/OR CERTIF	ICATES P	PERTINENT (TO THE POS	SITION APPLIED	FOR:

	1. WURK	EXPERIENC	بالات	特别是"ASSES " 1995年 - 19	
This portion must be accurate and complete. Please be as detail rejected. Under A, please indicate whether it is your PRESENT C volunteer and detail appointments. List jobs in order by starting w most difficult or most important responsibilities, and/or most sign combination of subject matter knowledge and skills and/or management.	OR LAST EMPLOYF ith your present job, o enificant accomplishe	ER IF NOT CURRENTL r last job if you are unemplements in the position held	Y EMPI ployed. I I, to inch	LOYED. List your entire work history, including p List each promotion as a separate job. Duties should tude percentage of time spent. Supervisory experi-	art-time, i include
A. NAME OF EMPLOYER/MAILING ADDRESS	Telephone No.:			From: Modayyear To:	
(Check One:) ☐ Present or ☐ Last Employer	Immediate Supe	ervisor:		Modayyear	
	<3			HRS. WORKED PER WEEK:	
Position Title:		Salary:	Rease	on for Leaving:	
Type of Business (i.e. construction)	This Position Is:	☐ Supervisory ☐	Non-S	Supervisory / 🗆 Permanent 🗅 Tempor	ary
Specific Duties Performed and Percentage of Time Sp	ent:				
				222	
B. NAME OF FORMER EMPLOYER/ MAILING ADDRESS Telephone No.:		From: modayyear To:			
	Immediate Supe	ervisor:		mo day year	
				HRS. WORKED PER WEEK:	
Position Title:		Salary:	Reas	on for Leaving:	
Type of Business (i.e. construction)	This Position Is: ☐ Supervisory ☐ Non-Supervisory / ☐ Permanent ☐ T		Supervisory / Permanent Tempor	ary	
Specific Duties Performed and Percentage of Time Sp	ent:				
	2277.2-18				
C. NAME OF FORMER EMPLOYER/ MAILING ADDRESS	Telephone No.:			From: modayyear	
	Immediate Supe	ervisor:		To: modayyear	
				HRS. WORKED PER WEEK:	
				TION WORLD I BR WEEK	
Position Title:		Salary:	Rease	on for Leaving:	-345
Type of Rusiness (i.e. construction)	This Position Is-	□ Supervisory □	Non-S	Supervisory / T Permanent T Tempor	913/

Specific Duties Performed and Percentage of Time Spent:

11. WORK EXPERIENCE (con't)					
D. NAME OF FORMER EMPLOYER/ MAILING ADDRESS	Telephone No.	:		From: modayyear	
	Immediate Sur	ervisor:		To: modayyear	
			HRS. WORKED PER WEEK:		
Position Title:		Salary:	Reas	son for Leaving:	
Type of Business (i.e. construction)	This Position Is:	☐ Supervisory ☐	Non	-Supervisory / Permanent Tempo	огагу
Specific Duties Performed and Percentage of Time S	pent:				%
	· · · · · · · · · · · · · · · · · · ·				
	 				
	1				L
E. NAME OF FORMER EMPLOYER/ MAILING ADDRESS	Telephone No.:			From: mo day year	
	Immediate Sup	ervisor:		To:	
		V2 V1002 ·		mo day year	
				HRS. WORKED PER WEEK:	
Position Title:		Salary:	Reas	on for Leaving:	
Type of Business (i.e. construction)	This Position Is:	☐ Supervisory ☐	Non-	-Supervisory / Permanent Tempo	огагу
Specific Duties Performed and Percentage of Time Sp	ent:				%
F. NAME OF FORMER EMPLOYER/ MAILING ADDRESS	Telephone No.:			From:	·
WAILING ADDRESS	Immediate Sup			modayyear To:	
	Innieulate Sup	er visor.		mo day year	
				HRS. WORKED PER WEEK:	
Position Title:		Salary:	Rease	on for Leaving:	
Type of Business (i.e. construction)	This Position Is:			Supervisory / Permanent Tempor	rarv
Specific Duties Performed and Percentage of Time Sp	ent:		-		%

12.	USE THIS BLOCK TO CONTINUE YOU	UR RESPONSES TO ANY NUMBERED SECTION	ONS OR ITEMS: (Please special	fy No. of Item.)	
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13.	PREFERENTIAL HIRE STATUS				
Fi	This applies only to first time applicants of Government of Guam Merit Scholarship or Educational Loan Recipients. If you wish to claim Preferential Hire Status, please check "Yes" and attach letter of eligibility, if not, check "N/A." This status is applicable only for initial employment with the Government of Guam. Approval of claim is subject to verification. If applicable, please specify previous applications in which you claimed preferential hire status (Continue on separate sheet				
	if necessary). If yes, please specify:		-		
		Position Title:		□ N/A	
		Position Title:			
ien vers		Position Title:	A CONTRACTOR OF THE PARTY OF TH		
		LTY AND ADMINISTRATIVE . DUCATIONAL INSTITUTIONS			
14.	 On a separate attachment please supply the following information: a. Higher education teaching experience. For each position indicate the dates of employment (month/year), whether full-time or part-time, tenure track or non-tenure, courses taught, other assignments, salary (9 month or 12 month), academic rank and the name of the Department Chair or Dean. b. List other employment information, which you feel may support your application. c. Major research and publication activities. Give bibliographic reference. d. Major grant activities. Indicate date, amount and source of funding and a brief description of the grant. e. Membership in professional organizations and other professional activities. 				
15.	REFERENCES: List three persons who have who have had the opportunity to evaluate your institute/agency where the position, which you	definite knowledge of your qualifications. Use major work. Please ask these people to send a confidential e are applying for, exists.	professors, department chairs, devaluation directly to the education	eans or others nai	
	NAME	ADDRESS	TITLE		
				-	
16.	If you plan to request a relocation reimburseme accompanying you to Guam. (ONLY IF APPI	ent, please supply us with the name, relationship, and a ICABLE)	ge of any dependent(s) who will	be	
	NAME	RELATIONSHIP	AGE	,	

IMPORTANT INFORMATION

PLEASE READ BEFORE SIGNING THIS APPLICATION

Job Application: The job application you submit is considered current for one year from the date the eligibility list is established. IT IS YOUR RESPONSIBILITY TO INFORM THIS OFFICE OF ANY CHANGES TO YOUR ADDRESS OR TELEPHONE NUMBER.

Evaluation Methods: To determine your qualifications for the position, which you are applying, job related tests designed to reveal your capacity to successfully perform the duties of the position are utilized. Most positions require an evaluation of your application to determine your qualification based on a rating of your education and experience. Additional examinations such as a written and a performance test may be required depending on the particular job requirements of the position. The top eligible will be referred for employment consideration for each vacancy subject to the Personnel Rules and Regulations of the respective department or agency. If a selection interview is required, you will be notified. Failure to submit to employment examination requirements will result in an ineligible rating.

Drug Screening: Upon selection for employment into the Government of Guam, you must take and pass urinalysis testing for illegal use of drugs. In addition, government employees are subject to their respective Drug-Free Work Place Program requirements. Failure to submit to drug testing will result in immediate disqualification or disciplinary action.

Pre-Employment Medical Examination: All applicants accepting employment with the government must take and pass a pre-entry physical examination as a condition of employment or continued employment. Applicants accepting employment with educational institutions and/or agencies requiring health clearance must take and pass a pre-entry and annual Tuberculosis Test as a condition of employment. All applicants/employees are responsible for all expenses incurred for this examination. Failure to satisfactorily meet or complete the specific requirements of the examination may result in your disqualification for or termination from employment.

Background Investigation: When you sign this job application, you authorize the Government to seek and obtain information regarding your suitability for employment. All factors, which are job related, may be investigated (e.g. previous employment, educational credentials, and criminal record). All information obtained may be used to determine your eligibility for employment in accordance with equal employment opportunity guidelines. In addition, when you sign this application, you release previous employers and job related sources from legal liability for the information they provide.

Probationary Period: If you are selected for permanent appointment to a classified position, you must initially undergo a probationary period subject to the Personnel Rules and Regulations of your respective department or agency. All Temporary or Limited-Term employees do not serve a probationary period and are subject to termination at will.

18. PERSONAL CONTACT

(Optional: In the event that we are unable to contact you, please give two names for reference.)

NAME	ADDRESS	TELEPHONE NO.	RELATIONSHIP



Government of Guam

PREFERENCE POINTS

Request Form

This form is used to award preference points for Veterans of the Armed Forces of the United States or the Guam Police Combat Patrol and Persons with disability. This form is separate and apart from the job application and will not be

att Mi	ached to the job application sub	mitted. HOWEVER, IF A	PPLYING FOR MORI	E JOB APPLICATION AND WILL NOT be E THAN ONE POSITION, YOU DER TO RECEIVE CREDIT FOR
NAI	ME:	SOCIAL SECURITY NUMBER:	POSITION TITLE:	JOB ANNOUNCEMENT NO.
1.			Military Preference Points Dates of Service:	
2.	PREFERENCE POINTS FOR I Do you wish to claim preference Date of Certification:		-	- · · · ·
RE	PROVAL OF POINTS IS SUBJEC QUESTED UNDER "GENERAL I U ARE CLAIMING	T TO VERIFICATION. PLE NSTRUCTIONS & INFORM	ASE SUBMIT THE APP ATION" FOR THE TYP	PROPRIATE DOCUMENTS AS E OF PREFERENCE POINTS
	(Attention: Read the	APPLICANT ST		igning this form.)
I, _ true que	(PRINT NAME) e, complete and correct to the estion on this form may be groun	best of my knowledge. I	understand that any fa	on this preference point form are alse or dishonest answer to any
		SIGNAT APPL	TURE OF	DATE



Government of Guam SUITABILITY DETERMINATION

Name:	Social Security Number:	Agency:	Posit	tion Applied For:	
The following information will be used to determine your suitability for employment. Convictions, dismissals from employment, or dishonorable separations from military service do not mean automatic disqualification. In determining employment suitability, we will evaluate the circumstances of each individual case, keeping in mind the requirements of the position being applied for.					
1. DISMISSAL FROM EMPLOYMEN	T/DISHONORABLE SE	PARATIONS FROM	I MILITARY SERVIC	CE	
Within the past seven years, were you:				1	
 Discharged (fired) from employ 	ment for any reason?			□ YES □ NO	
• Asked to resign (quit) after being informed that your employer intended to discharge (fire) you for any reason?				son? ☐ YES ☐ NO	
 Separated from military service 	under conditions other than	honorable?		☐ YES ☐ NO	
If "yes" to any of the ques					
Employer's Name/Addres Date of Action:	ss: Reason in Each	ı Case:			
2. CONVICTION FOR VIOLATION C	OF LAW				
 Have you been convicted of a vi 	olation of law (e.g. felony, 1			☐ YES ☐ NO	
Note: In answering this question 1) Arrests not followed		e following:			
	ere annulled or expunged				
	u were tried as a minor or ju	venile			
Have you ever been convicted o Guam or the federal government by		racy to overthrow the S	State/Government of	□ YES □ NO	
If "yes" to any of the above, you must surrounding the incident. Also, in the case of				lates and circumstances	
3. FAMILY MEMBERS IN THE GOVERNMENT Does this agency currently employ, in any capacity, any immediate member of your family? If "yes", please list the name(s), relationship, and position title. (The purpose of this question is to avoid violation of the Nepotism Rule, or related statutes, whereby spouses and persons within the first degree of "blood relationship" may not be employed in the same department or agency in a supervisor-subordinate relationship and where two or more family members under the same household are prohibited; exception to this rule may be made for the good of the government service.)				the oloyed	
NAME	R	ELATIONSHIP	POSITI	ION TITLE	
(ATTENTION: Re	APPLICANT S ad the following certificati		fore signing this form.)		
Ι,	, hereby certify that a	all statements made on	this suitability form are t	true, complete, and	
, hereby certify that all statements made on this suitability form are true, complete, and (PRINT NAME) correct to the best of my knowledge. I understand that any false or dishonest answer to any question on this form may be grounds for dismissing ne after an appointment.					
SIGNATURE O	F APPLICANT		DATE		

(sign in blue/black ink)



GOVERNMENT OF GUAM VOLUNTARY DATA RECORD SUMMARY

(EQUAL EMPLOYMENT OPPORTUNITY DATA)

The purpose of this form is to monitor the Affirmative Action and Equal Employment Opportunity representation within our diverse community. We are seeking your assistance to help us in this effort by accurately completing this form. Your cooperation is completely voluntary. It will not be used to make a decision regarding your application for employment. This form will be detached prior to the examination process.

1.	. POSITION TITLE APPLIED FOR:				
2.	JOB ANNOUNCEMENT NO.:	DATE:			
3.	CITIZENSHIP: U.S. Permanent Resident Federated States of Micronesia	☐ Republic of Marshall Islands ☐ Republic of Palau ☐ Other:			
4.	4. HOW DID YOU LEARN OF THE JOB FOR WHICH YOU ARE APPLYING? Job Information Bulletin Board, Government Agency. Specify: Department of Administration, Division of Personnel Management Job Information Counter One Stop Career Center, Department of Labor Job Announcement. Specify where seen: Newspaper Announcement. Specify: Relative, Friend, or Government Employee Other. Specify:				
5.	SEX: Male Female	6. DATE OF BIRTH :/			
7.	ETHNIC ORIGIN: Non-Resident Alien. Specify Country: Black, Non-Hispanic American Indian or Alaskan Native. Specify: Asian or Pacific Islander. Specify: Hispanic Other. Specify: Race/Ethnicity Unknown	8. ETHNIC GROUP: Asian Indian Carolinian Chamorro Chinese Filipino Japanese Korean Micronesian Thai Vietnamese Other:			
9.	MARITAL STATUS: ☐ Single ☐ M	Married			
TIL	- Covernment of Cuery does not discriminate on the he	havis of say were policion disability unwelsted to ich prominents petional or			

The Government of Guam does not discriminate on the basis of sex, race, religion, disability unrelated to job requirements, national or ethnic origin, age, or citizenship status in any employment decision or any other term, condition, or privilege of employment. Guam law also prohibits discrimination on the basis of marital status and political affiliation.