

**JOINT REGION MARIANAS**  
**NONAPPROPRIATED FUND INTERNAL APPLICATION**

\_\_\_\_\_ Vacancy Announcement

OR

\_\_\_\_\_ Applicant Supply File (ASF)

(Internal applications will be retained for 6 months)

DEPARTMENT OF THE NAVY (DON) IS AN EQUAL OPPORTUNITY EMPLOYER  
 FULL CONSIDERATION WILL BE GIVEN TO QUALIFIED APPLICANTS WITHOUT REGARD TO COLOR, CREED, RACE,  
 NATIONAL ORIGIN, SEX, AGE, SEXUAL ORIENTATION, AND HANDICAP CONDITION.

(PLEASE PRINT)

NAME:		WORK PHONE:	HOME PHONE:
POSITION APPLIED FOR:			GRADE OR PAY:
CURRENT TITLE:	FACILITY:		BASE:
DATE HIRED IN CURRENT POSITION:	CURRENT CATEGORY: <input type="checkbox"/> RFT <input type="checkbox"/> RPT <input type="checkbox"/> FLEX		GRADE OR PAY:
REASON FOR SUBMITTING INTERNAL APPLICATION:			
(Example: More pay, benefits, career choice, closer to home, etc.)			
RATING ON LAST PERFORMANCE APPRAISAL: <input type="checkbox"/> OUTSTANDING <input type="checkbox"/> HIGHLY SAT ISFACTORY <input type="checkbox"/> SATISFACTORY			
Do you have any relatives employed in the activity where the position you are applying for is located? <input type="checkbox"/> YES <input type="checkbox"/> NO			
IF YES, please provide name, position title, activity name, and relationship.			

CATEGORY YOU ARE WILLING TO ACCEPT: <input type="checkbox"/> REGULAR FULL-TIME <input type="checkbox"/> REGULAR PART-TIME <input type="checkbox"/> FLEXIBLE (SCHEDULED) <input type="checkbox"/> FLEXIBLE (ON-CALL)	LOCATIONS OF INTEREST: <input type="checkbox"/> NAVAL BASE GUAM <input type="checkbox"/> NAVAL SUPPORT ACTIVITY ANDERSEN GUAM <input type="checkbox"/> OTHER _____
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HIGHEST EDUCATION LEVEL: <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> COLLEGE <input type="checkbox"/> GRADUATE SCHOOL <input type="checkbox"/> OTHER _____	FIELD OF STUDY: _____  DEGREE/DIPLOMA:                      YEAR: <input type="checkbox"/> YES <input type="checkbox"/> NO                      _____
NAME OF SCHOOL, CITY & STATE	

## WORK HISTORY

**APPLICANTS WHO DO NOT MEET THE MINIMUM QUALIFICATION REQUIREMENTS OF THE POSITION  
WILL NOT BE CONSIDERED**

<b>NAME OF COMPANY (PREVIOUS POSITION)</b>		
<b>STREET ADDRESS, CITY, STATE &amp; ZIP CODE</b>	<b>DATE EMPLOYED</b>	<b>DATE LEFT</b>
<b>NAME &amp; TITLE OF IMMEDIATE SUPERVISOR</b>		
<b>DESCRIPTION OF DUTIES: (You may attach resume)</b>		
<b>REASON FOR LEAVING</b>		

<b>NAME OF COMPANY (PREVIOUS POSITION)</b>		
<b>STREET ADDRESS, CITY, STATE &amp; ZIP CODE</b>	<b>DATE EMPLOYED</b>	<b>DATE LEFT</b>
<b>NAME &amp; TITLE OF IMMEDIATE SUPERVISOR</b>		
<b>DESCRIPTION OF DUTIES: (You may attach resume)</b>		
<b>REASON FOR LEAVING</b>		

**USE SPACE PROVIDED TO LIST SPECIAL SKILLS OR QUALIFICATIONS YOU HAVE PERTAINING TO THE JOB(S) OF INTEREST**

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**SIGNATURE**

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**DATE**