

## CIVILIAN PERSONNEL ADVISORY CENTER (CPAC) NON-APPROPRIATED FUND APPLICATION INSTRUCTIONS

USE THE FOLLOWING CHART TO DETERMINE THE FORMS YOU ARE REQUIRED TO SUBMIT BASED ON YOUR APPLICANT CATEGORY

REQUIRED FORMS	MILITARY SPOUSE PREFERENCE (MSP)	FAMILY MEMBER (FM)	IN-SERVICE (CURRENTLY WORKING FOR FEDERAL SERVICE ON PERMANENT APPOINTMENT)	INVOLUNTARILY SEPARATED MILITARY MEMBER, OUTSIDE APPLICANT VETERAN	EXTERNAL (INCLUDES FORMAL APF OR NAF EMPLOYEE, AND PERSONS NOT AFFILIATED TO THIS INSTALLATION)
APPLICATION DA FORM 3433	YES	YES	YES	YES	YES
DA 3434 (NAF PERSONNEL ACTION) AND/OR SF 50 (APF PERSONNEL ACTION)	YES (IF ON LWOP)	YES (IF ON LWOP)	YES (IF ON LWOP)	YES (IF ON LWOP)	YES (IF ON LWOP)
TRANSCRIPTS	YES IF APPLICABLE	YES IF APPLICABLE	YES IF APPLICABLE	YES IF APPLICABLE	YES IF APPLICABLE
SPONSOR'S ORDERS	YES	YES	NO	NO	NO
LETTER FROM COMMANDER AUTHORIZING WORK	NO	NO	IF OFF DUTY MILITARY MEMBER	NO	NO
DD FORM 214 MEMBER 4 COPY	YES IF APPLICABLE	YES IF APPLICABLE	YES IF APPLICABLE	YES	YES IF APPLICABLE
LOCAL APPLICANT QUESTIONNAIRE	YES	YES	YES	YES	YES
SUPPLEMENTAL SHEET	YES	YES	YES	YES	YES
PASSPORT/VISA COPY	YES	YES	YES	YES	YES

FOR NON-SOFA VISA HOLDERS - BE SURE TO LIST ALL ENTRIES AND EXITS FROM KOREA ON THE LOCAL APPLICANT QUESTIONNAIRE

AFFILIATION MEANS THAT YOU ARE EITHER: CURRENTLY EMPLOYED ON THIS INSTALLATION, A FAMILY MEMBER/DEPENDANT TO SOMEONE THAT IS CURRENTLY EMPLOYED ON THIS INSTALLATION, A MILITARY SPOUSE IN THE PROCESS OF RELOCATING TO THIS INSTALLATION AND ARE WITHIN 30 DAYS OF MOVING, OR AN INVOLUNTARILY SEPARATED MILITARY MEMBER.

# LOCAL APPLICANT QUESTIONNAIRE (FAMILY MEMBER/OFF DUTY MILITARY)

**AUTHORITY:** Title 5, Code of Federal regulations, Section 5.2 and 5.3 Title 5, UBC Section 1301, 1304 and 3301, Section 8(b), 8(c) and 9(c) of Executive order 10450, Title 42, USC, Section 1434 and 2585.

**PURPOSE:** Used by Civilian Personnel specialist to make determinations regarding eligibility for employment with the US Forces and employment referral priorities.

**ROUTINE USES:** Records from this system of records may be disclosed for any of the blanket routine uses published by the Department of Defense. Furnishing the information is voluntary. If you do not give the request information or give erroneous information, it may result in erroneous employment determinations and may be grounds for not employing you or dismissal after you begin work.

NAME:	SSN:
PLACE OF BIRTH(CITY, STATE):	DATE OF BIRTH:

## SECTION A: TO BE COMPLETED BY ALL APPLICANTS

1. STATUS & REASONS FOR BEING IN THE OVERSEAS AREA (Mark "x" and complete information where applicable).

a.		SPOUSE OF ACTIVE DUTY MILITARY MEMBER ASSIGNED TO: _____ (Attach copy of sponsor's PCS orders, or agency documentation showing command sponsorship. Completes section B.
b.		SPOUSE OF A DOD CIVILIAN EMPLOYEE ASSIGNED TO: _____ (Attach copy of sponsor's PCS orders, or agency documentation showing command sponsorship. Completes Section B.
c.		CHILD OF ACTIVE DUTY MILITARY OR DOD CIVILIAN EMPLOYEE ASSIGNED TO: _____ (Attach copy of sponsor's PCS orders, or agency documentation showing command sponsorship. Completes Section B.
d.		ACTIVE DUTY MILITARY MEMBER SEEKING EMPLOYMENT DURING OFF DUTY TIME: Completes Section C.
e.		OTHER: (explain, e.g., Embassy personnel) _____

## SECTION B: TO BE COMPLETED BY SPOUSES & CHILDREN OF MILITARY & GOVERNMENT EMPLOYEES

2. MY SPONSOR IS (NAME/ GRADE OR RANK) \_\_\_\_\_

3. MY SPONSOR IS ASSIGNED TO (ORGANIZATION) \_\_\_\_\_ AT (POST/CITY) \_\_\_\_\_

4. MY SPONSOR \_\_\_\_\_ IS \_\_\_\_\_ IS NOT AUTHORIZED FOR COMMANDER SPONSORSHIP.

4. DATE/ PLACE OF MARRIAGE IF MILITARY SPOUSE: \_\_\_\_\_

5. DATE ARRIVED IN KOREA: \_\_\_\_\_ 6. MY SPONSOR'S DEROS IS \_\_\_\_\_

5. I \_\_\_\_\_ AM \_\_\_\_\_ AM NOT CURRENTLY RESIDING WITH YOUR SPONSOR.

## SECTION C: TO BE COMPLETED BY ACTIVE DUTY MILITARY MEMBERS SEEKING EMPLOYMENT IN OFF DUTY TIME:

6. ORGANIZATION TO WHICH YOU ARE CURRENTLY ASSIGNED: \_\_\_\_\_

7. DEROS: \_\_\_\_\_

8. I UNDERSTAND THAT UNDER THE JOINT ETHICS REGULATION MY MILITARY DUTIES TAKE PRIORITY OVER OTHER EMPLOYMENT: \_\_\_\_\_ (Initials)

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

# **STATEMENT OF UNDERSTANDING MILITARY SPOUSE AND FAMILY MEMBER PREFERENCE**

1. Military Spouse (MS) and Family Member (FM) preference is granted in the commuting area of the sponsor's duty location ONLY ONCE for each Permanent Change of Station (PCS). In foreign areas, spouses do not receive preference until arrival at the overseas location.
  
2. Family members of active duty military members and U.S. citizen civilian employees stationed in foreign areas will be afforded priority consideration in accordance with DODI 1400.25-V1412 for all grades and pay band levels through NF-3 and equivalent. This does not apply to Family members of locally hired civilian employees.
  
3. MS/ FM preference eligibility may accept or decline an unlimited number of NON-CONTINUING POSITIONS without loss of their military spouse preference. There is no limit to the number of times a military spouse may apply for and accept positions that are temporary, intermittent or flexible.
  
4. A continuing position is defined as one without a time limitation and having a guaranteed work schedule, such as part-time or fulltime. Non-continuing positions are positions filled by regular limited tenure appointment regardless of the work schedule and any NAF position for which the employment category is identified as flexible. Upon acceptance of a non-continuing position, the spouse's eligibility for preference for other non-continuing positions will be suspended until 60 days prior to the expiration of the appointment. This is applicable whether it is to an appropriate (APF) or non-appropriated fund (NAF) position within DOD.
  
5. Should a temporary position be terminated due to no fault of the employee before completing one year as a temporary employee, MS/FM preference may be restored. The Civilian Personnel Advisory Center will review the circumstances and will advise the employee whether MS/FM preference will be restored.

**ACKNOWLEDGEMENT:**

I understand the contents of this memorandum.

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Print Name

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Signature

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Date

# SUPPLEMENTAL APPLICATION FORM

NAME: \_\_\_\_\_ ANNOUNCEMENT NO: \_\_\_\_\_

POSITION: \_\_\_\_\_ LOWEST GRADE YOU WILL ACCEPT: \_\_\_\_\_

## TYPES OF EMPLOYMENT YOU ARE AVAILABLE FOR

\_\_\_\_\_ Full Time (40 hrs/week) \_\_\_\_\_ Day shift \_\_\_\_\_ Limited Tenure \_\_\_\_\_ Part Time (20-39 hrs/week) \_\_\_\_\_  
Evenings/Nights \_\_\_\_\_ Flexible \_\_\_\_\_ Rotating shift \_\_\_\_\_ Seasonal \_\_\_\_\_ Weekends

## GEOGRAPHICAL AVAILABILITY

\_\_\_\_\_ Yongsan, Seoul \_\_\_\_\_ K-16 Air Base, Sunnam \_\_\_\_\_ Camp Humphreys, Pyongtaek  
\_\_\_\_\_ Camp Hovey, Tongduchon \_\_\_\_\_ Camp Casey, Tongduchon \_\_\_\_\_ Camp Red Cloud, Uijongbu  
\_\_\_\_\_ Camp Henry/Walker, Daegu \_\_\_\_\_ Camp Carroll, Waegwan

## SPECIFIC DIVISION YOU ARE APPLYING (Child & Youth Services APPLICANT ONLY)

\_\_\_\_\_ Child Development Center (CDC) \_\_\_\_\_ School Age Service Center (SAS)  
\_\_\_\_\_ Middle School /Teen Center (MST) \_\_\_\_\_ Youth Sports \_\_\_\_\_ Parents Outreach Services (POS)

## SPECIAL QUALIFICATIONS/SKILLS:

\_\_\_\_\_ I certify that I can type 40 words per minute with no more than 3 errors  
\_\_\_\_\_ I am fluent in the Korean language and can translate oral & written English into Korean and vice versa  
\_\_\_\_\_ I possess a POV/military driver's license  
\_\_\_\_\_ I currently have a SECRET/TOP SECRET security clearance  
\_\_\_\_\_ Other: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date