

DISTRICT OF COLUMBIA GOVERNMENT

Rev. 5/14



EMPLOYMENT APPLICATION (DC2000)

Please answer the questions and complete all required fields on this application. In addition, please respond to all of the ranking factors listed in the vacancy announcement. Finally, if you are claiming residency preference, please complete the residency preference form.

1. POSITION VACANCY INFORMATION

Position Title Vacancy Announcement No

2. PERSONAL DATA

<input type="text"/> Last Name	<input type="text"/> First Name	<input type="text"/> Middle Name	
<input type="text"/> Street Address		<input type="text"/> Apt #	
<input type="text"/> City	<input type="text"/> State	<input type="text"/> Zip Code	<input type="text"/> Ward
<input type="text"/> Other names ever used	<input type="text"/> Home Phone	<input type="text"/> Business Phone	
<input type="text"/> Email	<input type="text"/> Social Security Number	<input type="text"/> Date of Birth	

3. D.C. EMPLOYMENT HISTORY AND AVAILABILITY

- a. Are you now or were you ever employed by the District of Columbia Government?
- b. Mark below each type of current or previous D.C. government appointment. Check all applicable boxes.
- | | | |
|---|---|---|
| <input type="checkbox"/> Temporary | <input type="checkbox"/> Term | <input type="checkbox"/> Permanent |
| <input type="checkbox"/> Career | <input type="checkbox"/> Excepted Service | <input type="checkbox"/> Executive Service |
| <input type="checkbox"/> Management Supervisory Service | <input type="checkbox"/> Legal Service | <input type="checkbox"/> Other <input type="text"/> |
- c. List highest grade, classification series and step attained: Grade Series Step
- When can you start work? Lowest pay or grade you will accept

4. RESIDENCY

- a. Are you claiming a residency preference for the position indicated above? Yes No
- b. I understand the residency preference requirements (found at the end of this document). Yes No
- c. If the position you are applying for above is in the Career Service, Management Supervisory Service, or Legal Service, excluding the Senior Executive Attorney Services, are you claiming a residence preference? (If you claim residency preference, you must complete the Residency Preference for Employment form, DC-2000RP). Yes No
- d. If the position you are applying for above is in the Excepted Service, Executive Service, or Senior Executive Attorney Service, do you acknowledge and understand that, if selected, you must be a domiciliary of the District of Columbia at the time of the appointment or within 180 days of the appointment date, and maintain District domicile for the duration of the appointment? Yes No

5. MILITARY SERVICE AND VETERANS PREFERENCE

Veterans preference is granted by law to disabled veterans, to veterans who served on active duty in certain time periods or military operations, and, under certain conditions, to the spouses, widows, widowers, or mothers of deceased or disabled veterans.

Have you ever served on active duty in the United States Armed Forces?

Yes No

(Answer "NO" if your only active duty was for training, including basic training, in the Reserves and National Guard)

Did you or will you retire at or above the rank of Major or Lieutenant Commander?

Yes No

(If "YES," you are not eligible for veterans preference unless your retirement is based upon a service-connected disability.)

From To

Dates of Active Duty Service (Month/Day/Year)

Character of Separation

Campaign or Expeditionary Medals Received

Separation Date

Preference claimed: 5-point preference 10-point preference None

(Please check one. You must show proof when hired.)

6. EDUCATION

a. High School:

Indicate highest grade completed:

Address of School: Zip Code

Did you graduate? Yes No If no, have you received a GED high school equivalency? Yes No

Attended From (month/year) To (month/year)

b. Colleges and Universities

School 1

Indicate highest degree(s) obtained (e.g., A.A., B.S.):

Address of College or University Zip Code

Major Minor

Major Semester Credit Hours OR Major Quarter Credit Hours

Attended From (month/year) To (month/year)

School 2

Indicate highest degree(s) obtained (e.g., A.A., B.S.):

Address of College or University Zip Code

Major Minor

Major Semester Credit Hours OR Major Quarter Credit Hours

Attended From (month/year) To (month/year)

7. TRAINING

List relevant training, licenses or skills (e.g., sign language). Include schools attended, addresses, certificates or degrees awarded, dates attended, number of credit hours, and major/minor field or subjects studied.

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8. LANGUAGE CAPABILITIES

List the languages you speak, read and write

Language	Speak	Read	Write
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. WORK EXPERIENCE

List paid or unpaid work experience relevant to the position for which you are applying. (Note: If additional space is needed, continue on a separate sheet of paper).

No Work Experience

PRESENT OR MOST RELEVANT POSITION:

Employer's Name	<input type="text"/>			Average Hours Per Week
Address	Dates of Employment (Month/Year)	Annual Salary		<input type="text"/>
		Starting \$	<input type="text"/>	
<input type="text"/>	From <input type="text"/>	To <input type="text"/>	Final \$	<input type="text"/>
Telephone	<input type="text"/>	Name and Title of Supervisor	<input type="text"/>	
Reason for leaving	<input type="text"/>		No. of Employees Supervised	<input type="text"/>

If District or Federal Employment, List Series, Grade or Rank and Date of Last Promotion

Job Title and Duties, Responsibilities and Accomplishments

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POSITION:

Employer's Name

Dates of Employment
(Month/Year)

From

To

Annual Salary

Starting \$

Final \$

Average
Hours
Per Week

Address

Telephone

Name and Title of Supervisor

Reason for leaving

No. of Employees Supervised

If District or Federal Employment, List Series, Grade or Rank and Date of Last

Job Title and Duties, Responsibilities and Accomplishments

POSITION:

Employer's Name

Dates of Employment
(Month/Year)

From

To

Annual Salary

Starting \$

Final \$

Average
Hours
Per Week

Address

Telephone

Name and Title of Supervisor

Reason for leaving

No. of Employees Supervised

If District or Federal Employment, List Series, Grade or Rank and Date of Last Promotion

Job Title and Duties, Responsibilities and Accomplishments

POSITION:

Employer's Name <input type="text"/>	Dates of Employment (Month/Year) From <input type="text"/> To <input type="text"/>	Annual Salary Starting \$ <input type="text"/> Final \$ <input type="text"/>	Average Hours Per Week <input type="text"/>
Address <input type="text"/>			

Telephone <input type="text"/>	Name and Title of Supervisor <input type="text"/>
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Reason for leaving <input type="text"/>	No. of Employees Supervised <input type="text"/>
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If District or Federal Employment, List Series, Grade or Rank and Date of Last

Job Title and Duties, Responsibilities and Accomplishments

POSITION:

Employer's Name <input type="text"/>	Dates of Employment (Month/Year) From <input type="text"/> To <input type="text"/>	Annual Salary Starting \$ <input type="text"/> Final \$ <input type="text"/>	Average Hours Per Week <input type="text"/>
Address <input type="text"/>			

Telephone <input type="text"/>	Name and Title of Supervisor <input type="text"/>
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Reason for leaving <input type="text"/>	No. of Employees Supervised <input type="text"/>
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If District or Federal Employment, List Series, Grade or Rank and Date of Last

Job Title and Duties, Responsibilities and Accomplishments

10. BACKGROUND INFORMATION

- a. Do any of your relatives work for the District of Columbia government? Include: father, mother, husband, wife, son, daughter, brother, sister, uncle, aunt, first cousin, niece, nephew, father-in-law, mother-in-law, daughter-in-law; brother-in-law; sister-in-law; stepfather; stepmother; stepdaughter; stepbrother; half-brother; and half-sister. Yes No

If "YES," in the space below, write, for each of these relatives, their (1) name; (2) relationship to you; and (3) District agency in which the relative works.

Name*	Relationship	District Agency

(*Note: If more than five (5) relatives continue on a separate sheet of paper.)

- b. Do you receive or have you ever applied for retirement pay, pension, or other pay based on District of Columbia government, federal civilian or federal military service. Yes No
- c. Are you a citizen of the United States? Yes No
- d. Are you legally authorized to work in the United States? Yes No

To work for the District of Columbia government in certain public safety positions, you must be a citizen of the United States. If selected, you will be required to submit evidence of identity and employment eligibility.

11. SIGNATURE, CERTIFICATION, AND RELEASE OF INFORMATION

YOU MUST SIGN THIS APPLICATION. Read the following carefully before you sign. I understand that a false statement on any part of my application may be grounds for not hiring me, or for firing me after I begin work (D.C. Official Code § 1-616.51 *et seq.*) (2001). I understand that the making of a false statement on this form or materials submitted with this form is punishable by criminal penalties pursuant to D.C. Official Code § 22-2405 *et seq.* (2001). I understand that any information I give may be investigated as allowed by law or Mayoral order. I consent to the release of information regarding my suitability for District of Columbia Government employment by employers, schools, law enforcement agencies, and other individuals and organizations, to investigators, human resources specialists, and other authorized employees of the District of Columbia government. I certify that, to the best of my knowledge and belief, all of my statements are true, correct, and complete.

Sign

Date

12. RANKING FACTORS

The ranking factors found in the vacancy announcement will be used in the evaluation process for all positions other than wage grade. All applicants **MUST** respond to the ranking factors. Please describe specific incidents of sustained achievements from your experience that show evidence of the level at which you meet the ranking factors that have been determined to be of importance for the position for which you are applying. You may refer to any experience, education, training, awards, outside activities, etc. that include the degree to which you possess the job related knowledge, skills, and abilities described in the ranking factors. The information given in response to the ranking factors should be complete and accurate to the best of your knowledge. **FAILURE TO RESPOND TO ALL RANKING FACTORS MAY ELIMINATE YOU FROM CONSIDERATION.**

Use the spaces below to respond to the ranking factors on the job vacancy announcement.

Ranking Factor 1

Ranking Factor 2

Ranking Factor 3

A large, empty rectangular box with a thin black border, intended for input or data related to Ranking Factor 3.

Ranking Factor 4

A large, empty rectangular box with a thin black border, intended for input or data related to Ranking Factor 4.