APPLICANT GENERAL INFORMATION FORM

This form must be filled out and submitted with your application. Failure to submit this form will result in your application being considered ineligible. A separate form and application must be submitted for each position and payband for which you are applying or you will not receive consideration. Provide the following information for the position you are applying for:

Name:	SSN:
Title Of Position:	
Career Path (Choose One):	
Scientific and Engineering (ZP)*Technician (ZT)Administrative (ZA)Support (ZS)**	
Pay Band (Choose One):	
I II IV V	
YesNo U.S CitizenYesNo 5 Point Veteran PreferenceYesNo 10 Point Veteran PreferenceYesNo Career Transition AssistanYesNo Interagency Career TransiYesNo Term Employment (1 - 4 y)YesNo Part Time Employment AcYesNo Temporary Employment AcYesNo Temporary Employment Ac acceptable < 45 days 45 - 120 days 4 - 6 Months 6 mo 1 Yr	ce Claimed ce Plan Applicant (CTAP) tion Assistance Plan Applicant (ICTAP) year appointment) Acceptable ceptable
*If you are applying for a ZP position, yo (unofficial transcript is acceptable) with e **If you are applying for a ZS position, o specify your typing speed:Words Per	each application. other than Police Officer, your must

Details about NIST's paybanding system are available at WWW.NIST.GOV/public_affairs/paycharts.htm