

Standard Form 171-A— Continuation Sheet for SF 171

Form Approved:
OMB No. 3206-0012

• Attach all SF 171-A's to your application at the top of page 3.

1. Name (Last, First, Middle Initial)	2. Social Security Number
3. Job Title or Announcement Number You Are Applying For	4. Date Completed

ADDITIONAL WORK EXPERIENCE BLOCKS

Name and address of employer's organization (include ZIP Code, if known)	Dates employed (give month, day and year)	Average number of hours per week	Number of employees you supervise
	From: _____ To: _____	Your reason for wanting to leave	
	Salary or earnings		
Starting \$ _____ per	If Federal employment (civilian or military) list series, grade or rank, and, if promoted in this job, the date of your last promotion		
Ending \$ _____ per			
Your immediate supervisor Name	Telephone No.	Exact title of your job	

Description of work: Describe your specific duties, responsibilities and accomplishments in this job, **including** the job title(s) of any employees you supervise. *If you describe more than one type of work (for example, carpentry and painting, or personnel and budget), write the approximate percentage of time you spent doing each.*

For Agency Use (skill codes, etc.)

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Standard Form 171-A— Continuation Sheet for SF 171 (Back)

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ADDITIONAL WORK EXPERIENCE BLOCKS

<input style="width: 20px; height: 20px; margin-bottom: 5px;" type="checkbox"/> Name and address of employer's organization (include ZIP Code, if known)	Dates employed (give month, day and year) From: _____ To: _____	Average number of hours per week	Number of employees you supervise
Salary or earnings Starting \$ _____ per _____ Ending \$ _____ per _____		Your reason for wanting to leave	
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