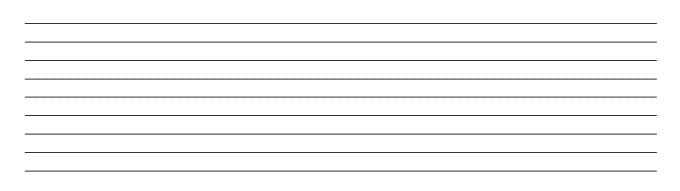
NAME: \_\_\_\_\_

## SUPPLEMENT FOR PERSONNEL MANAGEMENT SPECIALIST

In order to ensure that you receive the maximum credit to which you are entitled, it is essential that you complete this form as accurately and completely as possible. Be sure to list each relevant work experience, and list each change in job title or promotion **SEPERATELY**. **In describing your duties and responsibilities, avoid the use of general terms such as "handled," "was responsible for," "see attached resume," etc.** Rather, give specific examples, which will clearly depict the exact nature of the tasks you performed. You may attach plain sheets of paper, if additional space is needed.

	you possess professional management experience, as described in the puncement?    Yes  No	J
If "Y	es," please provide the following information:	
a)	Name of Employer	
b)	Your job title	
c)	Complete dates that you held that title:    From: /    Month  Year    Month	Year
d)	Average number of hours worked per week	
e)	Name and title of your immediate supervisor	
f)	Describe the personnel program/development where you worked	(i.e., how lar

f) Describe the personnel program/development where you worked (i.e., how large was the company, how many employees worked for the company, what functions did the personnel program/department handle, etc.).



## (Pers Mgmt Spec Page 2 of 2)

g)	Give a detailed description of your duties, pertinent to personnel management. Describe
	how you applied the principles and practices of personnel management. What types of
	personnel management problems were you asked to resolve? What types of
	recommendations did you make, regarding personnel management issues? Also, give a
	breakdown of the average number of hours you spent per week on each of your activities.

II. Are you substituting Education for the required Experience? Yes \_\_\_\_\_ No \_\_\_\_

If "Yes," please submit a copy of your transcripts in order to receive credit for your education.

.....

I certify that all statements made on this supplemental form are true and complete to the best of my knowledge. I understand and agree that any misrepresentation or omission whenever discovered, is grounds for the denial of or immediate separation from employment.

Signature: \_\_\_\_\_\_Date: \_\_\_\_\_