



HUMAN RESOURCES OFFICE DEPENDENT YOUTH EMPLOYMENT PROGRAM SUPPLEMENT FORM

NAVEUR NAVSUPPACT NAPLES 12308/1 (New 3-99)

PART I - APPLICANT INFORMATION		
Name (Last, First, MI):		
Date of Birth:	Place of Birth:	Social Security Number:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Education: <input type="checkbox"/> High School (Currently Enrolled) <input type="checkbox"/> High School Graduate <input type="checkbox"/> College (Currently Enrolled)	

PART II - JOB CATEGORIES (Specific categories as listed below must be used)		
<input checked="" type="checkbox"/> Clerical	<input checked="" type="checkbox"/> General Laborer	<input checked="" type="checkbox"/> Recreation Aid
I am applying for the following categories:		
1.	2.	3.
Indicate your first, second, and third preference location:		
<input type="checkbox"/> Agnano	<input type="checkbox"/> Capodichino	<input type="checkbox"/> Pinetamare
<input type="checkbox"/> AFSouth	<input type="checkbox"/> Carney Park	<input type="checkbox"/> Aversa
Typing Skills _____ words per minute.	Computer Skills: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Beginner	
What dates are you available for work?		What language(s) do you speak (other than English)?
From:	To:	Italian <input type="checkbox"/> Yes Other <input type="checkbox"/> No

PART III - SPONSOR INFORMATION	
Name (Last, First, MI):	
<input type="checkbox"/> DOD Civilian <input type="checkbox"/> Military <input type="checkbox"/> Other Departure Date: _____	Duty Station: _____ Duty Phone: _____

FOR APPLICANTS UNDER 18 YEARS OF AGE - PLEASE COMPLETE THE FOLLOWING

"I have no objection to my above named dependent accepting employment under the U.S. Naval Support Activity Dependent Youth Employment Program (DYEP)".

Signature of Parent or Guardian

APPLICANT CERTIFICATION:

I certify the above information is true and correct to the best of my knowledge and I understand that any false statements may be grounds for my removal from the position.

Signature

Date