Osan AB Summer Hire Program Application

	Student Backgr	ound Information			
1. Student Name (Last, First, MI):	2. Student SSN:	2. Student SSN:		3. DOB (MM/DD/YYYY):	
4. Home Telephone:	5. Cell Phone:	5. Cell Phone:		6. E-mail Address:	
7. Mailing Address:	•				
	Sponsor	Information			
8. Sponsor's Name (Last, First, M	I): 9. Sponsor's DODIC	9. Sponsor's DODID:		10. Sponsor's DEROS:	
11. Work Telephone:	12. Cellphone:	12. Cellphone:		13. Sponsor's Organization:	
14. Sponsor's Military Email:	(Optional) Spouse's	(Optional) Spouse's Cellphone:			
	Edu	cation			
15. Education Level: () Middl	le School () High School	() College Stud	ent		
16. If you are in College, where a	re you attending?	17. What is your Ma	ajor?		
	Speci	ial Skills			
18. Have you ever worked for a Summer hire Program at Osan AB? () Yes () No		21. In the space provi	ided, please indicate yo	ur future career field.	
19. Do you have any medical con you from working outdoors? (ditions that would prohibit) Yes () No				
20. Please indicate which positio	n you are interested in: _aborer () Clerk	22. Student Signature	2:	23. Date Signed	
	CPF U	SE ONLY			
Date Submitted:	Confimation Email:	RPA No.:			
() Clerk () Laborer	Org/Assignment :				
SEE REVER	SE SIDE FOR PARENTAL CONSE	ENT TO WORK AND SCH	IOOL CERTIFICATION		

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Parental Consent to Participate in Youth Employment **Must be completed by your Sponsor/Parent** 24. Sponsor's Status () Active Duty Militay () DOD Civilian (Includes GSWG, NAF, DODDS Teachers, and AAFES Employees) () Others (please explain) 25. Working Conditions: My Child has my permission to perform the following duties: () Clerical Jobs only (usually in an office setting)) Labor Jobs only (non-skilled, non-hazardous work such as cutting grass, painint, light lifting)) Both Clerical and Labor 26. I () do authorize () do not authorize my dependent child to receive emergency medical care. (Understand that this applies to those situations which are job realted injuries) 26. Relationship to Child: 27. Sponsor's Signature: **School Certification** 28. The student identified in this application is a full time student at: 29. Current Grade (circle): 7 8 9 10 11 12 Date of graduation (if a senior): 30. School Official Name, position and Signature: **Application Checklist** Before you submit your applicationl, please ensure your application is complete!! () Osan AB Summer Hire Program Application [] Parental Consent [] School Certification) Resume) Copy of Sponsor's Orders) Letter of Employment (Dependents of Civilian Employees only)) Copy of Physical Exam (cannot be older than 1 year)) Copy of Social Security Card or previous year's tax form (see below for statement)) Copy of Applicant's Passport (Pages with picture and SOFA Stamp)) College Students: Letter from Registrar Stating you are full-time student All students must have their Social Security number verified without exception.

Department of the Air Force is an Equal Opportunity Employer

Please submit your FULL application to Osan Civilian Personnel in Bldg 936, Room 112.

Due to PII found in the package, we will not be accepting email submissions.

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Privacy Act Statement

AUTHORITY: EO 9397

PRINCIPAL PURPOSE: ELIGIBILITY DETERMINATION FOR Youth Employment Programs. Verification of relationship and dependency. Verification of Social Security Number and U.S. Citizenship.

DISCLOSURE: We request your SSN to keep your record straight. Other people may have the same name. As allowed by law or presidential Directive, we use your SSN to identify you, schools, banks, and other who know you. Disclosure of the requested information in this application is voluntary. However, failure to provide complete and accurate information may result in denial of employment.

Osan AB Civilian Personnel Contact Information

Osan AB Civilian Personnel 51 FSS/FSC Building 936 Tel: 050-5784-4218

Email: Osan.SummerHire@us.af.mil

(applications submitted via email will not be accepted)

Submission Information

Please submit your FULL and COMPLETED application to our office in-person.

Accepting applications: 8 Mar 2024- 22 Mar 2024

Monday- Thursday: 0800- 1500

Friday: 0800-1400

As a reminder, your application has Personal Identifying Information (PII) and should be protected!

Timeline

Last day to submit applications: Friday, 22 March 2024

Entry on Duty: 17 June 2024 Last day: 26 July 2024

By submitting this application, you (and your guardian) understand that if your sponsor is PCS-ing before the Summer Program is complete, you will submit a letter of resignation to your supervisor.