

U.S. Department of State BIOGRAPHIC DATA SHEET		Check One <input type="checkbox"/> Foreign Service <input type="checkbox"/> Civil Service					
This information is for your official personnel record. Report changes in this data to your personnel officer. Print clearly using dark ink. The reverse of this form has instructions for residence and dependency data, Items 12, 14, 15, 16 and 20.							
1. Name (Last, First, Middle)		2. Sex	3. Marital Status	4. <input type="radio"/> Mr. <input type="radio"/> Miss <input type="radio"/> Mrs. <input type="radio"/> Ms.	5. Social Security No		
6. Date of Birth (mm-dd-yyyy)		7. Place of Birth (State or Country)		CODE	High School Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	9. First Name of Spouse (Include maiden name of wife)	
10. Nationality of Spouse Present Previous		CODE	11. Veterans Pref. <input type="checkbox"/> None <input type="checkbox"/> 5 pt. <input type="checkbox"/> 10 pt.		CODE	12. Legal Residence	CODE
13. Name of College and State		CODE	Dates (mm-dd-yyyy) Attended	Degree	Yr. of Degree	Major Field of Study	CODE
RESIDENCE AND DEPENDENCY DATA-FOREIGN SERVICE EMPLOYEES ONLY							
14. Residence at time of employment (City and State)		15. Home leave residence (City and State)		CODE	16. Residence for Service separation (City and State)		
17. Spouse's professional field (i.e., nurse, budget analyst, physical scientist)		18. Will spouse travel with you at Govt. Expense? <input type="checkbox"/> Yes <input type="checkbox"/> No		19. Marriage Date (mm-dd-yyyy) Place			
20. Dependents other than spouse who will travel with you at Govt. expense and reside abroad with you							
<i>Name (Last, First, Middle)</i>		<i>Relationship</i>		<i>Nationality</i>		<i>Date of Birth (mm-dd-yyyy)</i>	
DO NOT COMPLETE 21, 22, and 23							
21. Level of Education		22. No. of adult dependents		23. Year of birth of children under 21 (enter the year using last four digits)			
_____		_____		_____			
Class or grade				Signature		Date (mm-dd-yyyy)	