Standard Form 86A (EG) Revised September 1995 U.S. Office of Personnel Management 5 CFR Parts 731, 732, and 736

CONTINUATION SHEET FOR QUESTIONNAIRES SF 86, SF 85P, AND SF 85

Form approved OMB No. 3206-0007 NSN 7540-01-268-4828 86-203

For use with the SF 86, Questionnaire for National Security Positions; SF 85P, Questionnaire for Public Trust Positions; and SF 85, Questionnaire for Non-Sensitive Positions

INSTRUCTIONS: Use Activities." Follow the many continuation sh	he instruc	ction on the	ue your answers form for the part	to "Wh ticular o	iere You Hav questions yo	e Lived," "Where Y u are answering and	ou Wen I give in	t to Scho formation	ooi," and/or n in the sar	"Your Employment ne sequence. Use as	
Your Name								Your Social Security Number			
WHERE YOU HAV	E LIVED) (Continue	ed)						PA		
Month/Year Mo	nth/Year	Street Addre	ss		Apt. #	City (Country)			State	Zip Code	
#1							0	l zio Co		Tolophone Number	
Name of Person Who K	new You	Street Addres	ss A	Apt. #	City (Country	,	State	Zip Cod	1e	Telephone Number	
Month/Year Mo	nth/Year	Street Addre	ess		Apt. #	City (Country)		-	State	Zip Code	
#2								la: o		7.1.1.1.1.1	
Name of Person Who K	(new You	Street Addre	SE /	Apt. #	City (Country	")	State	Zip Co	ae	Telephane Number	
Month/Year Mo	nth/Year	Street Addre	SS		Apt. #ू	City (Country)			State	Zip Code	
#3								l Zin Co		7-1-1-1-1-1	
Name of Person Who K	new You	Street Addres	ss A	Apt. #	City (Country	,	State	Zip Cod	je	Telephone Number	
Month/Year Mo	nth/Year	Street Addre	ess		Apt. #	City (Country)			State	Zip Code	
#4				1			<u> </u>	1 7:- Ca	d a		
Name of Person Who K	new You	Street Addres	ss /	Apt. #	City (Country	"	State	Zip Co	ue	Telephone Number	
Month/Year Mo	nth/Year	Street Addre	ess		Apt. #	City (Country)		•	State	Zip Code	
#5		C Add		^ # 1	City (Country	4	State	Zip Co	do.	Telephone Number	
Name of Person Who K	new You	Street Addres	ss <i>/</i>	Apt. #	City (Country	"	State	2.5 00		relephone Number	
WHERE YOU WE	NT TO S	CHOOL (C	Continued)								
Month/Year Mo	nth/Year				Degree/Diploma/Other				Month/Year Awarded		
#1 Street Addrss and City	(Country)	of School						1	State	Zip Code	
Stiest Addiss and Sity	(002)										
Name of Person Who K	new You	Street Addres	ss /	Apt. #	City (Country	/)	State	Zip Co	de	Telephone Number	
Month/Year Mo	onth/Year	Code Name of School			Degree/Diploma/Other				Month/Year Awarded		
#2						<u> </u>					
Street Addrss and City	(Country)) of School							State	Zip Code	
Name of Person Who k	(new You	Street Addre	ess	Apt. #	City (Country	yl	State	Zip Co	de	Telephone Number	
Month/Year Mo	onth/Year	r Code Name of School			Degree/Diploma/Other				Month/Year Awarded		
#3			<u> </u>								
Street Addrss and City	y (Country) of School							State	Zip Code	
		I Connec A didi		Apt #	I City /Court		State	Zip Ci	nde .	Telephone Number	
Name of Person Who I	knew You	Street Addre	ess	Apt. #	City (Countr	y,	State	Zip Ci	ode	Telephone Number	
r to CF RE	CE OED	CE OED C	SE DE and SE DE	A annr	oved by GS	September 1995					

YOUR EMP	PLOYMENT ACTIVITIES ear Month/Year Code	S (Continued) Employer/Verifier Name/Milit	tary Duty Location			Your Position Title	/Military Rank		
				4					
Employer's/Ve	rifier's Street Address	City (Country)		State	Zip Code	Telephone Number			
Street Address	s of Job Location (If differen	City (Country)	State	Zip Code	Telephone Number				
Supervisor's N	lame & Street Address (If dif	City (Country)	State	Zip Code	Telephone Number				
	Month/Year Month/Year,	Position Title		Supervisor					
PREVIOUS PERIODS OF	Month/Year Month/Year	Position Title	Supe		rvisor				
ACTIVITY	Month/Year Month/Year	Position Title		Supervisor					
Month/Y	ear Month/Year Code	itary Duty Location			Your Position Title/Military Rank				
Employer's/Ve	erifier's Street Address		City (Country)		State	Zip Code	Telephone Number		
Street Addres	s of Job Location (If differen	nt than Employer's Address)	City (Country)		State	Zip Code	Telephone Number		
Supervisor's N	lame & Street Address (If dir	City (Country)		State	Zip Code	Telephone Number			
	Month/Year Month/Year	Position Title	Super	Supervisor					
PREVIOUS PERIODS OF ACTIVITY	Month/Year Month/Year	Position Title		Supervisor					
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Employer's/Ve	erifier's Street Address		City (Country)		State	Zip Code	Telephone Number		
Street Addres	s of Job Location (If differen	City (Country) Sta			Zip Code	Telephone Number			
Supervisor's I	Name & Street Address (If di	City (Country) State			Zip Code	Telephone Number			
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A01141111	Month/Year Month/Year	Position Title		Supervisor					
Month/Y	ear Month/Year Code	Employer/Verifier Name/Mi	litary Duty Location			Your Position Title	/Military Rank		
Employer's/Ve	rifier's Street Address	City (Country)		State	Zip Code	Telephone Number			
Street Address	s of Job Location <i>(If differen</i>	City (Country)		State	Zip Code	Telephone Number			
Supervisor's N	lame & Street Address (If dia	City (Country)	State	Zip Code	Telephone Number				
	Month/Year Month/Year	Position Title		Superv	Supervisor				
PREVIOUS PERIODS OF	Month/Year Month/Year	Position Title		Superv	Supervisor				
ACTIVITY	Month/Year Month/Year		Super	visor					
Enter your S	ocial Security Number bi	fore going to the next pag	e						