



**U.S. MISSION (THAILAND)
APPLICATION FOR OVERSEAS SEASONAL HIRE PROGRAM APPLICATION FORM (OSHP)**

| POSITION | | | | |
|---|--|-----------------|--|------------------------------|
| 1. List the section which you prefer to work in <u>priority order</u> : 1) _____ 2) _____ 3) _____ 4) _____ | 2. Ability to work around the following areas (<i>Multiple selection</i>): <input type="checkbox"/> Wireless Road <input type="checkbox"/> Sathorn tai Road <input type="checkbox"/> Victory Monument <input type="checkbox"/> Rajdamri <input type="checkbox"/> Nonthaburi <input type="checkbox"/> Chiang Mai | | 3. Available dates for full-time employment (<i>Must be available the entire 4-week period with no breaks</i>). <input type="checkbox"/> Session I only <input type="checkbox"/> Session II only <input type="checkbox"/> Both Session I and Session II | |
| PERSONAL INFORMATION | | | | |
| 4. Last Name(s)/Surnames: | | First Name : | | Middle Name: |
| 5. Full SSN: | | 6. Citizenship: | | 7. Date of birth (mm/dd/yy): |
| 8. E-mail Address: | | 9. Home Phone: | | 10. Cell Phone: |
| 11. Address in Thailand: | | | | |
| 12. Parent's Name/Agency/Contact Information: | | | | |
| Name (<i>first-last name</i>): | Agency: | Office Tel.: | Cell Phone: | Email: |
| | | | | |
| EDUCATION | | | | |
| 13. Applicants must be a full-time or part-time student currently enrolled in a course of study at an educational institution, college, or university within the past 12 months, and is registered to re-enroll in the immediate upcoming regular school term. <i>S/He must present evidence of their student status which post will certify and include with official employment documentation.</i> | | | | |
| 13a. High School or General Equivalency Diploma (GED) Information: | | | Starting Date (mm-yyyy): _____ | |
| Name: _____ | | | Graduated: <input type="checkbox"/> No, Level/Year: _____ | |
| Address (City/Country): _____ | | | <input type="checkbox"/> Yes, Date(mm-yyyy): _____ | |
| 13b. University/College Information: | | | Starting Date (mm-yyy): _____ | |
| Name: _____ | | | Currently enrolled Year? | |
| Address (City/Country): _____ | | | <input type="checkbox"/> Year 1 <input type="checkbox"/> Year 3 | |
| Program: _____ | | | <input type="checkbox"/> Year 2 <input type="checkbox"/> Year 4 | |
| Major Field of Study: _____ | | | <input type="checkbox"/> Other, specify: _____ | |
| Minor Field (<i>if any</i>): _____ | | | <input type="checkbox"/> Graduated: Date(mm-yyyy): _____ | |
| 14. Ability to speak Thai: <input type="checkbox"/> No <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent | | | 15. Typing speed: _____ WPM | |
| Ability to read/Write Thai: <input type="checkbox"/> No <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent | | | 16. English Writing skills: <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent | |
| 17. List computer skills/experience (for example: Microsoft Word, Excel, PowerPoint, Outlook, Adobe Acrobat, Internet, Social Media, Audio Visual, Film/Editing, Video Production, Publisher, etc.): | | | | |
| 18. Other pertinent qualifications/experience (for example: clerical/administrative, project management, customer service, math, mechanical, electrical, electronics/technical skills, AutoCAD, etc.): | | | | |
| EXPERIENCE | | | | |
| 19. Have you ever worked for the U.S. Government? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |

19a. WORK EXPERIENCE

Include **all clerical work experience**. Start with your present or most recent work experience. When describing work, list specific duties/responsibilities and accomplishments.

19a. Title of Position:

| | | |
|-----------------|---------------|-----------------|
| From (mm-yyyy): | To (mm-yyyy): | Hours per Week: |
|-----------------|---------------|-----------------|

| | |
|---|--|
| Employer's Name: Address (City/Country): | Level of Clearance: <input type="checkbox"/> No <input type="checkbox"/> Yes, please specify: |
|---|--|

Short description of your major duties/responsibilities and accomplishments.

19b. Title of Position:

| | | |
|-----------------|---------------|-----------------|
| From (mm-yyyy): | To (mm-yyyy): | Hours per Week: |
|-----------------|---------------|-----------------|

| | |
|---|--|
| Employer's Name: Address (City/Country): | Level of Clearance: <input type="checkbox"/> No <input type="checkbox"/> Yes, please specify: |
|---|--|

Short description of your major duties/responsibilities and accomplishments.

19c. Title of Position:

| | | |
|-----------------|---------------|-----------------|
| From (mm-yyyy): | To (mm-yyyy): | Hours per Week: |
|-----------------|---------------|-----------------|

| | |
|---|--|
| Employer's Name: Address (City/Country): | Level of Clearance: <input type="checkbox"/> No <input type="checkbox"/> Yes, please specify: |
|---|--|

Short description of your major duties/responsibilities and accomplishments.

19d. Title of Position:

| | | |
|-----------------|---------------|-----------------|
| From (mm-yyyy): | To (mm-yyyy): | Hours per Week: |
|-----------------|---------------|-----------------|

| | |
|---|--|
| Employer's Name: Address (City/Country): | Level of Clearance: <input type="checkbox"/> No <input type="checkbox"/> Yes, please specify: |
|---|--|

Short description of your major duties/responsibilities and accomplishments.

19e. Title of Position:

| | | |
|-----------------|---------------|-----------------|
| From (mm-yyyy): | To (mm-yyyy): | Hours per Week: |
|-----------------|---------------|-----------------|

| | |
|---|--|
| Employer's Name: Address (City/Country): | Level of Clearance: <input type="checkbox"/> No <input type="checkbox"/> Yes, please specify: |
|---|--|

Short description of your major duties/responsibilities and accomplishments.

19f. Title of Position:

| | | |
|-----------------|---------------|-----------------|
| From (mm-yyyy): | To (mm-yyyy): | Hours per Week: |
|-----------------|---------------|-----------------|

| | |
|---|--|
| Employer's Name: Address (City/Country): | Level of Clearance: <input type="checkbox"/> No <input type="checkbox"/> Yes, please specify: |
|---|--|

Short description of your major duties/responsibilities and accomplishments.

SIGNATURE AND CERTIFICATION

20. I certify that all statements made in this application are true, complete and correct to the best of my knowledge and belief and are made in good faith.

| | |
|----------------|-------------------|
| Signature: /S/ | Date (mm-dd-yyyy) |
|----------------|-------------------|