

DEPARTMENT OF
HOMELAND SECURITY
U.S. COAST GUARD
ANSC 7062 (11-06)

U.S. COAST GUARD AUXILIARY
APPLICATION FOR NATIONAL STAFF

DATE

See Privacy Act Statement and instructions on page two

SECTION I - DEPARTMENT - *Pick only one*

BOATING (B)	OPERATIONS (O)	TRAINING (T)
LEGAL (L)	INFORMATION TECHNOLOGY (IT)	PERSONNEL (P)
MARINE SAFETY (M)	PUBLIC AFFAIRS (PA)	EDUCATION (E)
FINANCE (F)	VESSEL EXAMINATION (V)	NACO STAFF (N)

SECTION II - MEMBER INFORMATION - *Complete all applicable fields*

MEMBER ID NUMBER	LAST NAME, FIRST NAME, MIDDLE INITIAL			SPOUSE NAME
STREET ADDRESS		CITY	ST	ZIP+4 - (REQUIRED)
HOME PHONE	WORK PHONE	CELL PHONE		
FAX NUMBER	EMAIL (PERSONAL)	EMAIL (WORK/OFFICE)		
PREVIOUS/CURRENT NATIONAL STAFF POSITIONS				

SECTION III COMPETENCIES - *Answer all questions - insert N/A if not applicable*

AUXILIARY TRAINING - QUALIFICATIONS

AUXOP COXN CREW IT VE PV AIR TRIDENT

OTHER _____

Highest elected office held _____ Date _____ Highest appointed office held _____ Date _____

OTHER TRAINING - QUALIFICATIONS - EDUCATION

Military experience _____

Professional experience _____

Education: High School College Graduate School Degree(s) _____

Majors _____

PROFESSIONAL ORGANIZATIONS - AWARDS - HONORS

AUXILIARY AWARDS AND HONORS

COMPUTER SKILLS

PC MAC OTHER EXPERIENCE LEVEL: NOVICE ACCOMPLISHED EXPERT

PROGRAMS: _____

WHAT TYPE OF WORK WOULD YOU LIKE TO DO?

WHAT QUALIFIES YOU (SKILLS, LANGUAGES, EXPERIENCE)

Include your resume • Applications must be renewed every two years • This form may be reproduced.
Applications should be e-mailed to the appropriate Department Chief and A. Rick Aimetti, DVC-PC,
1 Universe Way Mount Sinai, NY 11766-2525
E-mail: afta@optonline.net

Previous editions are obsolete

NATIONAL STAFF APPLICATION

GENERAL - This form is used to apply for appointment of an Auxiliary member to the National Staff. This application must be renewed or updated every two years. PLEASE TYPE OR PRINT ALL DATA

TOP

1. DATE – Enter the date of your application

SECTION I - DEPARTMENT

1. Check only one department – the one for which you are applying. If you wish to apply for multiple departments, complete a separate form for each.

SECTION II - APPLICANT INFORMATION

- 1. MEMBER NUMBER** – Enter the your seven digit member number.
- 2. NAME** – Enter your last name, first name and middle initial.
- 3. SPOUSE NAME** – Enter your spouse's first name if applicable.
- 4. STREET ADDRESS, CITY, STATE, ZIP+4** – Enter your street address, city, two-letter abbreviation of state and nine digit ZIP+4 (required).
- 5. TELEPHONE NUMBERS** – Enter home, work, cell and FAX numbers as appropriate, including area codes for each number.
- 6. E-MAIL** – Enter your e-mail address, both personal and work/office if available.
- 7. PREVIOUS/CURRENT NATIONAL STAFF POSITIONS** – Enter all positions on national staff you have held or are holding.

SECTION III - COMPETENCIES

- 1. AUXILIARY TRAINING - QUALIFICATIONS** – Check the appropriate box(es). List additional qualifications after "OTHER". If none, enter "N/A" in "OTHER" field. Enter staff abbreviations and end date for highest elected and appointed offices held.
- 2. OTHER TRAINING - QUALIFICATIONS - EDUCATION** – List military experience. If not in the military, indicate N/A. Professional experience - List highest position, company and dates. Note any professional skills or profession. Education: check highest level completed, entering any degrees earned and major study areas.
- 3. PROFESSIONAL ORGANIZATION AWARDS AND HONORS** – List any significant awards and honors you have received.
- 4. AUXILIARY AWARDS AND HONORS** – List awards you have received during your Auxiliary career.
- 5. COMPUTER SKILLS** – Select platform(s) and experience level. List major programs you are accomplished in using.
- 6. WHAT TYPE OF WORK WOULD YOU LIKE TO DO** – Tell us what area you would like to offer your services in.
- 7. WHAT QUALIFIES YOU** – Tell us what skills, languages, and experiences qualifies you for the position you seek.

Members desiring to serve on the National Staff are to complete this application form. The more information that is given on this form and your attached resumé, the better the chance that an appropriate selection can be made. The applicant should send this completed form and resumé directly to the department chief, who will match the application to job requirements. A complete copy is also to be sent to the DVC-PS, who will maintain a file of potential National Staff appointees and notify the department chief of persons interested in their program.

RESUME GUIDE

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|---|--|
| <ul style="list-style-type: none"> • Name, address and member ID. • Career summary
List companies and positions held and dates of employment
List skills used or acquired. • Responsibilities. • Education
List colleges attended, curriculum, majors/minors, degrees, dates. • Professional Experience
Are you a licensed professional ? What is your field ? Active? | <ul style="list-style-type: none"> • Auxiliary Experience
Qualifications - list all courses completed.
List all offices held, elected and appointed, with dates. • Professional/civic/fraternal organizations.
When listing the organization, please indicate if a past or present officer, active? • Activities and interests. |
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PRIVACY ACT STATEMENT

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| <ol style="list-style-type: none"> 1. AUTHORITY 2. PRINCIPAL PURPOSE 3. THE ROUTINE USES 4. DISCLOSURE | <p>14 USC Sec 823</p> <p>Used to review resume and data for qualification in applying for a National Staff Office and maintaining files.</p> <p>All information furnished is for the official use of the U.S. Coast Guard and the U.S. Coast Guard Auxiliary.</p> <p>Voluntary. Failure to provide the requested information may result in no further consideration for a National Staff Office.</p> |
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