



FLEET & FAMILY READINESS

NAVY REGION JAPAN

NAF EMPLOYMENT APPLICATION

Thank you for your interest in Fleet & Family Readiness (FFR) Nonappropriated Fund (NAF) employment. Please submit your resume and or completed NAF Employment Application form at NAF Human Resources Office (HRO), Commander Navy Region Japan, via email to FFR_NAFRecruitment@us.navy.mil

REQUIRED DOCUMENTS WHEN SUBMITTING A COMPLETE APPLICATION PACKET:

1. Type or print clearly in black or blue ink. Please submit a separate resume and/or application and all required documents for each job vacancies for which you apply.
2. Resume or NAF application form. Ensure that the job announcement number is listed for the position you would like to be considered for.
(NOTE: If applying to any CYP positions, you must submit both resume and a completed NAF application form.)
3. CYP Eligibility Packet – only if applying for any CYP positions.
4. Copy of PCS Orders and Family Entry Approval (Military) OR Sponsor's Letter of Employment (Civilian)
5. [OF-306](#) (Declaration for Federal Employment) – Must be signed in ink and dated within the opening and closing date of the vacancy announcement you are applying for.
6. Proof of Education (transcripts/copy of degree(s)/certification(s)), if applicable to position requirements
7. If claiming Veteran's Preference, please submit a legible copy of your DD214 page 4.
8. Military Spouse Preference can only be used for NAF positions at the NF-03 level and below or equivalent.
9. If you are a current federal employee, please submit your most recent Personnel Action Report (PAR) or SF-50

NOTE: Submitted applications and resumes will be retained for 90 days. Management reserves the right to fill a vacancy by methods other than merit staffing procedures (i.e. non-competitive placements in lieu of or as exceptions to competitive procedures) or cancel a vacancy announcement at any time during the recruitment process.

**DEPARTMENT OF THE NAVY IS AN EQUAL OPPORTUNITY
EMPLOYER**

*Please contact the CNRJ NAF HR office at 243-5446 if you have further questions.
Thank you!*

Name:		Announcement Number:																			
PROFESSIONAL REFERENCES																					
<i>Please list three (3) people not related to you who can furnish information regarding your employment and qualifications for the position for which you applied.</i>																					
Full Name	E-mail Address	Telephone Number	Occupation																		
EDUCATION																					
<i>What is the highest level of education you have completed?</i> <input type="checkbox"/> High School/GED <input type="checkbox"/> Associate's Degree <input type="checkbox"/> Master's Degree <input type="checkbox"/> Some College <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Doctorate Degree																					
School Name & Address <i>Begin with last high school attended</i>	Total Credit Hours Complete	Degree Received	Date Received (month/year)																		
TRAINING																					
Course Title	Name of School or Source	Date Received (month/year)																			
ADDITIONAL SKILLS & QUALIFICATIONS																					
Computer	<input type="checkbox"/> Word Processing or Design: <input type="checkbox"/> Spreadsheet or Database: <input type="checkbox"/> Other:																				
Licenses	<input type="checkbox"/> Driver's: <input type="checkbox"/> Commercial Driver's (CDL): <input type="checkbox"/> Other:	<i>Class:</i> <i>Class:</i> <i>Class:</i>	<i>Expiration:</i> <i>Expiration:</i> <i>Expiration:</i>																		
Certificates	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><i>Type</i></td> <td><i>Expiration</i></td> <td><i>Type</i></td> <td><i>Expiration</i></td> <td><i>Type</i></td> <td><i>Expiration</i></td> </tr> <tr> <td><input type="checkbox"/> CPR:</td> <td> </td> <td><input type="checkbox"/> Lifeguard:</td> <td> </td> <td><input type="checkbox"/> Other:</td> <td> </td> </tr> <tr> <td><input type="checkbox"/> First Aid:</td> <td> </td> <td><input type="checkbox"/> WSI:</td> <td> </td> <td><input type="checkbox"/> Other:</td> <td> </td> </tr> </table>	<i>Type</i>	<i>Expiration</i>	<i>Type</i>	<i>Expiration</i>	<i>Type</i>	<i>Expiration</i>	<input type="checkbox"/> CPR:		<input type="checkbox"/> Lifeguard:		<input type="checkbox"/> Other:		<input type="checkbox"/> First Aid:		<input type="checkbox"/> WSI:		<input type="checkbox"/> Other:			
<i>Type</i>	<i>Expiration</i>	<i>Type</i>	<i>Expiration</i>	<i>Type</i>	<i>Expiration</i>																
<input type="checkbox"/> CPR:		<input type="checkbox"/> Lifeguard:		<input type="checkbox"/> Other:																	
<input type="checkbox"/> First Aid:		<input type="checkbox"/> WSI:		<input type="checkbox"/> Other:																	
Other	Equipment, machinery, technology, language, etc.:																				
APPLICANT CERTIFICATION & SIGNATURE																					
<i>I certify that the information provided by me with this application is true, complete, and correct to the best of my knowledge and belief. I authorize the references listed above to disclose information concerning my previous employment and experience as it pertains to the position I am seeking.</i>																					
Printed Name of Applicant		Signature of Applicant	Date																		



WORK HISTORY CONTINUATION

Please list most recent employment first. Attach additional continuation pages as needed.

Name of Company/Government Agency	Kind of Business	Phone Number	
Street Address	City	State	Zip Code
Name and Title of Immediate Supervisor	Dates Employed <i>From</i> <i>To</i>	Salary at Leaving	

Job Title

Description of Duties	Reason for Leaving
-----------------------	--------------------

Name of Company/Government Agency	Kind of Business	Phone Number	
Street Address	City	State	Zip Code
Name and Title of Immediate Supervisor	Dates Employed <i>From</i> <i>To</i>	Salary at Leaving	

Job Title

Description of Duties	Reason for Leaving
-----------------------	--------------------

Name of Company/Government Agency	Kind of Business	Phone Number	
Street Address	City	State	Zip Code
Name and Title of Immediate Supervisor	Dates Employed <i>From</i> <i>To</i>	Salary at Leaving	

Job Title

Description of Duties	Reason for Leaving
-----------------------	--------------------