

OPERATION TRANSITION EMPLOYER REGISTRATION

Form Approved
OMB No. 0704-0324
Expires Dec 31, 1996

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0324), Washington, DC 20503.

**PLEASE DO NOT RETURN YOUR COMPLETED FORM TO EITHER OF THESE ADDRESSES ABOVE.
RETURN COMPLETED FORM TO: DMDC, ATTENTION: OPERATION TRANSITION, BOX 100, FORT ORD, CA 93941-0100**

1. ORGANIZATION NAME AND ADDRESS (Include 9-digit ZIP Code) <div style="text-align: center; font-size: 4em;">A</div>		2. EMPLOYMENT CONTACT ADDRESS (If different from Item 1) (Include 9-digit ZIP Code)													
3. ORGANIZATION CONTACT <div style="text-align: center; font-size: 4em;">A</div>		4. EMPLOYMENT CONTACT (If different from Item 3)													
5. ORGANIZATION TELEPHONE NUMBER		6. EMPLOYMENT CONTACT TELEPHONE NUMBER (If different from Item 5)													
7. FAX TELEPHONE NUMBER		8. FAX ROUTING ADDRESS													
9. HOW DID YOU HEAR ABOUT OPERATION TRANSITION? <div style="text-align: center; font-size: 4em;">M</div>		10. IS YOUR ORGANIZATION A (Check one) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><input type="checkbox"/> a. Private Sector Employer</td> <td style="width: 50%;"><input type="checkbox"/> b. Public or Community Service Employer</td> </tr> </table>		<input type="checkbox"/> a. Private Sector Employer	<input type="checkbox"/> b. Public or Community Service Employer										
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11. TYPES AND LOCATIONS OF POSITIONS IN ORGANIZATION LIKELY TO BE AVAILABLE (Briefly describe)															
12. PROCEDURES FOR APPLYING FOR AVAILABLE POSITIONS (Please indicate if you do not wish to receive unsolicited resumes) <div style="text-align: center; font-size: 4em;">P</div>															
13a. SIZE OF ORGANIZATION		13b. MAJOR FUNCTION/BUSINESS ACTIVITY OF ORGANIZATION													
14a. IS YOUR ORGANIZATION INVOLVED IN (Check applicable block(s)) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;"><input type="checkbox"/> (1) Placement Services</td> <td style="width: 25%;"><input type="checkbox"/> (4) Franchise Operations</td> </tr> <tr> <td><input type="checkbox"/> (2) Direct Marketing</td> <td><input type="checkbox"/> (5) None of the above</td> </tr> <tr> <td><input type="checkbox"/> (3) Multi-level Marketing</td> <td></td> </tr> </table>		<input type="checkbox"/> (1) Placement Services	<input type="checkbox"/> (4) Franchise Operations	<input type="checkbox"/> (2) Direct Marketing	<input type="checkbox"/> (5) None of the above	<input type="checkbox"/> (3) Multi-level Marketing		14b. ARE YOUR POSITION(S) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><input type="checkbox"/> (1) Commission only</td> <td style="width: 50%;"><input type="checkbox"/> (1) YES <input type="checkbox"/> (2) NO</td> </tr> <tr> <td><input type="checkbox"/> (2) Salary only</td> <td><input type="checkbox"/> (3) IF YES, SPECIFY AMOUNT</td> </tr> <tr> <td><input type="checkbox"/> (3) Combination of commission and salary</td> <td style="text-align: center; font-size: 2em;">\$</td> </tr> </table>		<input type="checkbox"/> (1) Commission only	<input type="checkbox"/> (1) YES <input type="checkbox"/> (2) NO	<input type="checkbox"/> (2) Salary only	<input type="checkbox"/> (3) IF YES, SPECIFY AMOUNT	<input type="checkbox"/> (3) Combination of commission and salary	\$
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15. AGREEMENT I understand this agreement covers the use of Operation Transition automated systems including the Defense Outplacement Referral System (DORS), the Public and Community Service (PACS) Personnel Registry, and the Transition Bulletin Board (TBB). I hereby agree to use the DORS and PACS Personnel Registry only for employment purposes at no charge to the individual. I also agree not to use the DORS and PACS Personnel Registry to develop mailing lists or to promote business opportunities such as franchise or direct or multi-level marketing operations. I certify that the information provided is true, accurate, and complete. I acknowledge that any false statement may be punishable pursuant to Title 18 U.S.C. Section 1001. <div style="text-align: right; font-size: 4em; margin-top: 20px;">E</div>															
16. SIGNATURE			17. DATE (YYMMDD)												
GOVERNMENT USE ONLY															
18. REGISTRATION NUMBER		19. CLERK	20. DATE (YYMMDD)												