CONTINUATION SHEET FOR QUESTIONNAIRES

SF 86, SF 85P, AND SF 85

Your Social Security Number

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 this form to continue your answers to "Where You Have Lived," "Where You Went to School," and/or "Your Employment Activities." Follow the instructions on the form for the particular questions you are answering and give information in the same sequence. Use as many continuation sheets as needed.

Your Name

WHERE YOU HAVE LIVED (Continued) Month/Year Month/Year Street Address Apt. # City (Country) State ZIP Code #1 То Name of Person Who Knew You Street Address Apt. # City (Country) State ZIP Code Telephone Number) Month/Year Month/Year Street Address Apt. # City (Country) State ZIP Code #2 То Name of Person Who Knew You Street Address Apt. # City (Country) State ZIP Code **Telephone Number** () Month/Year Month/Year Street Address City (Country) ZIP Code Apt. # State #3 То Name of Person Who Knew You Street Address City (Country) ZIP Code Telephone Number Apt. # State Month/Year ZIP Code Month/Year Street Address Apt. # City (Country) State #4 To Name of Person Who Knew You Street Address Apt. # City (Country) State ZIP Code Telephone Number () Month/Year Month/Year Street Address Apt. # City (Country) State ZIP Code #5 То Telephone Number Name of Person Who Knew You ZIP Code Street Address Apt. # City (Country) State) WHERE YOU WENT TO SCHOOL (Continued) Name of School Month/Year Awarded Month/Year Month/Year Code Degree/Diploma/Other #1 То Street Address and City (Country) of School State ZIP Code Name of Person Who Knew You ZIP Code Telephone Number Street Address City (Country) State Apt. #) Month/Year Month/Year Code Name of School Degree/Diploma/Other Month/Year Awarded #2 То Street Address and City (Country) of School ZIP Code State Name of Person Who Knew You ZIP Code Street Address Apt. # City (Country) State Telephone Number) Month/Year Month/Year Code Name of School Degree/Diploma/Other Month/Year Awarded #3 То Street Address and City (Country) of School State ZIP Code Name of Person Who Knew You Street Address City (Country) ZIP Code **Telephone Number** Apt. # State)

Exception to SF85, SF85P, SF85P-S, SF86, and SF86A approved by GSA September, 1995. Designed using Perform Pro, WHS/DIOR, Sep 95

YOUR EM	PLOYMENT ACTIVIT	Γ ΙΕS (Co						
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Street Address of Job Location (If different than			Employer's Address) City (Country)			State	ZIP Code	Telephone Number
Supervisor's Name & Street Address (If differen			nt than Job Location) City (Country)			State	ZIP Code	Telephone Number
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Enter your Social Security Number before going to the next page------