

APPLICATION FOR FEDERAL EMPLOYMENT

ANNO. NO.
APP. NO.

Answer every question clearly and completely. Use typewriter or print in BLACK ink. Black entries assure appointing agencies clear photographic copies. Use printed side ONLY. Give all names used, such as maiden name: *Mrs. Mary Louise Jones Doe*. If you are applying for a specific United States Civil Service Examination, read the Examination Announcement carefully, follow all directions, and mail this application to the office named therein; if not, mail with an explanatory letter to the U. S. CIVIL SERVICE COMMISSION, WASHINGTON, D. C., unless otherwise directed. Notify same office of any change of address.

This space for agency use:

ANSWER 1, 2, AND 3 ONLY IF APPLYING FOR A SPECIFIC EXAMINATION:

1. Place of examination (if a written test) or place of employment (if specified in announcement)

City and State _____

2. Name of examination: (See announcement for EXACT title)

3. Optional subject (if any):

AV. _____

This space for U. S. Civil Service Commission

Appor.
 Nonappor.

To U. S. Civil Service Commission

This space for U. S. Civil Service Commission

4. Mr.
 Mrs.
 Miss **Harold** **Weisberg**
(First) (Middle) (Last)

5. **313 H Street, NW**
(R. D. or street number)

City or post office, and State **Washington, D. C.**

6. Date of birth (month, day, year): **April 8, 1913**

7. Age last birthday: **29**

8. Date of this application: **May 21, 1942**

9. Legal or voting residence:

State **Delaware**

10. Telephone: Business—
Residence— **DI. 2108** **DI. 2108**

11. (a) Check one: Male. Female.
(b) Check one: Single. Married. Divorced. Separated. Widowed.

12. Height, without shoes: **5** ft **10** in. Weight: **220** lb.

O. S.	_____	_____	_____
Gr.	_____	_____	_____
E & E.	_____	_____	_____
P & D.	_____	_____	_____
Ini.	_____	_____	_____

Preference: Allowed—
 Veteran.
 Disability.
 Wife.
 Widow.
 Disallowed.
 Closed.

Indian.

Adm'd exam. _____
Approved by _____
Exam. date _____
Not. Ra. _____
Date Reg. _____

Material att'd.
 Material filed.
 Material ret. _____

13. Where were you born? **Philadelphia, Pennsylvania**
(Town) (State or Country)

14. Are you a citizen of the United States? (Check proper box).
Unless otherwise instructed, naturalized citizens must submit, along with the application, Naturalization Certificate; other foreign-born, documentary proof of citizenship. Documents will be returned.

Yes No

15. Have you ever been arrested, or summoned into court as a defendant, or indicted, or convicted, or fined, or imprisoned, or placed on probation, or has any case against you been filed, or have you ever been ordered to deposit collateral for alleged breach or violation of any law or police regulation or ordinance whatsoever? . . . If so, list all cases without any exception whatsoever, under Item 45, page 4, giving in each case (1) the date, (2) your age at the time, (3) the place where the alleged offense or violation occurred, (4) the name and location of the court, (5) the nature of the offense or violation, (6) the penalty, if any, imposed, or other disposition. The above question includes arrests by military or naval authorities and disciplinary action imposed by courts martial, as well as in civil cases. If appointed, your fingerprints will be taken.

Yes No
unless minor parking violation is meant.

16. (a) Have you any physical defect or disability whatsoever? . . . Yes No
(b) Have you ever had a nervous breakdown? . . . Yes No
If your answer to either (a) or (b) is yes, give full particulars under Item 45, page 4.

17. Do you advocate or have you ever advocated, or are you now or have you ever been a member of any organization that advocates the overthrow of the Government of the United States by force or violence? . . . Yes No
If so, give complete details under Item 45.

18. Have you ever been discharged for misconduct or unsatisfactory service, or forced to resign from any position? . . . Yes No
If so, state (under Item 45), when and where employed and give the name and address of your employer and the reason for your discharge or forced resignation in each case.

19. Within the past 12 months, have you used intoxicating beverages? If so, specify: Occasionally. Habitually. To excess. Yes No

20. Are any members of your family or relatives (either blood or by marriage), employed by the United States Government, excluding persons in the armed forces? . . . Yes No
If so, give name, address, relationship, and branch of service of each such relative under Item 45.

21. Are you NOW employed by the Federal Government? . . . Yes No

(a) If so, _____ (Department or agency) _____ (Bureau)

(b) If you now are or have ever been so employed, give dates: from **May** 19**35** to **October** 19**39**
(Month) (Year) (Month) (Year)

22. (a) Were you ever in the U. S. military or naval service? . . . Yes No
If so, give branch of service and date of last discharge:
 Army. Navy. Marine. Coast Guard.

(b) Were all discharges granted under honorable conditions? . . . Yes No

(c) Have you already established military preference with the Civil Service Commission? . . . Yes No
If so, check kind of preference below:
 Veteran. Disabled. Wife of Disabled. Widow of Veteran.

If you are applying for a specific examination, and wish to claim veteran preference in connection with it, attach C. S. C. (Preference) Form 14, together with the evidence specified therein.

23. Have you registered under the Selective Service Act? . . . Yes No
If so, give address of local board: **Armory, Wilmington, Delaware**

If classified, give your classification **1-B** Your order number **4173**

24. (a) Are you now a member of any branch of military or naval reserve? . . . Yes No
If so, give name of organization _____

(b) Are you now on active duty? . . . Yes No

25. Give number of persons completely dependent on you, other than husband or wife . . . _____

26. Would you accept short-term appointment? . . . 6 Months. 3 Months. 1 Month. Yes No

27. (a) Would you accept appointment anywhere offered in the United States? . . . **Perhaps** . . . Yes No
Give location preferences _____

(b) Would you accept appointment outside the United States? . . . Give locations acceptable **Perhaps** Yes No

(c) Would you accept appointment in Washington, D. C. ? . . . Yes No
If so, and if you are applying for a specific examination, refer to the examination announcement to see if the Certificate of Residence (C. S. C. Form 12) is to be submitted. Proof of residence is required for many kinds of positions.

28. What is the lowest entrance salary you will accept? . . . **\$4,000** per year
You will not be considered for positions paying less.

29. Are you willing to travel? . . . Yes No
If so, specify: Occasionally. Frequently. Constantly.

30. How much notice will you require to report for work? **Few days**

31. (a) Have you ever filed applications for any Federal civil service examinations? (If so, list them below.) Yes No

Titles of examinations	Examined in what city	Month and year	Ratings
Wage-Hour Inspector	Washington, D. C.		
Information Specialist	Washington, D. C.		

(b) Have you passed any State or other civil service examination (other than the above) within the last 5 years? If so give details under Item 45, Page 4 Yes No

32. EDUCATION: (a) Circle highest grade completed, elementary or high school: 1 2 3 4 5 6 7 8 9 10 11 12. Did you graduate? Yes No

Name and location of school	Dates attended		Years completed		Degrees conferred		Semester hours credit
	From—	To—	Day	Night	Title	Date	
(b) College or university: University of Delaware Newark, Delaware	1931	1935	3				
(c) Other					Studies		

(d) Undergraduate major subjects (20 or more semester hours)	Semester hrs.	Major subjects (graduate)	Semester hrs.
Various Engineering Subjects			
English			
History			
Social Sciences			

33. Indicate your knowledge of foreign languages.

	READ Exc. Good Fair	SPEAK Exc. Good Fair	UNDERSTAND Exc. Good Fair
Jewish	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
German	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
French	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

34. Are you now a licensed member of any trade or profession (such as electrician, radio operator, pilot, lawyer, CPA, etc.)? Yes No

If not, have you ever been licensed? Yes No

Give kind of license and State _____

Earliest license (year) _____

Most recent license (year) _____

35. REFERENCES: List five persons, who are not related to you by blood or marriage, who live in the United States, and who are or have been mainly responsible for close direction of your work, or who are in a position to judge your work critically in those occupations in which you regard yourself as best qualified.

Full Name	Address (Give complete address, including street and number)	Business or Occupation
M. Robert Rogers	Washington Crossing, Pa.	Editor
Allan Chase	420 Central Park West, New York City	Editor
Robert Wohlforth	Ridgefield, Conn.	Head Senate Investigating
Gardner Jackson	6 West Kirke Street, Chevy Chase, Md.	Asst. to Under Sec. of Agri
James M. Rosbrow	Langham Road, Wilmington, Del.	Asst. Dir., Unemp. Comp. Co

36. May inquiry be made of your present employer regarding your character, qualifications, etc.? Yes No

37. EXPERIENCE: In the space furnished below give a record of every employment, both public and private, which you have had since you first began to work. Start with your present position and work back to the first position you held, accounting for all periods of unemployment. Describe your field of work and position and, except for employments held less than three months, give your duties and responsibilities in such detail as to make your qualifications clear. Give name you used on pay roll if different from that given on this application.

PRESENT POSITION

Place Washington, D. C. State _____

From October, 1939 to May, 1942

Name of employer: Self

Address: 313 H Street, NW

Kind of business or organization: Free-lance writing

Number and class of employees you supervise: _____

Name and title of your immediate supervisor: _____

Exact title of your position: _____ Salary: Starting, \$ _____ Per Final, \$ _____

Duties and responsibilities: Free-lance writer, investigator. In this period was Washington correspondent for magazine "Friday" for a few months in 1940, resigned; Washington correspondent for National Picture Magazine CLICK, October 1940-February 1942, resigned; now Washington correspondent magazine "Picture Scoop"

Machines and equipment you used: _____

Place Washington, D. C.
 From July 1936 To July 1939
 Name of employer: Subcom. on Edu. & Labor under S.
 Address Ras. 266
Senate Office Building
 Kind of business or organization:
Senate Investigating Committee
 Number and class of employees you supervised up to about 25;
Proofreaders; clerks; indexers
 Name and title of your immediate supervisor Robert Wohlforth
 Reason for leaving Termination of work

Exact title of your position Editor, Investigator Salary: Starting, \$ 1,440
Asst. Secretary (Sec. Administrative Head) Per year Final, \$ 3,200
 Duties and responsibilities Edited 20,000,000 words of committee's
hearings, reports and other publications; supervised in-
dexing, made arrangements for hearings; distributed pub-
lications. As Asst. Sec., duties included liaison with
government departments, press, persons and corporations
under investigation, etc. As investigator was sent into
field to initiate and conduct investigations. Other
numerous duties--average work-day about 15 hours--too
many to detail.
Actually on payroll of Farm Security Administration on
detail.

Place Washington, D. C.
 From May 1935 To July 1936
 Name of employer:
Department of Agriculture
 Address Old Post Office Building
 Kind of business or organization:
Government Department
 Number and class of employees you supervised
 Name and title of your immediate supervisor
 Reason for leaving Detailed to Senate
Committee

Exact title of your position File clerk Salary: Starting, \$ 1,440
 Per year Final, \$ 1,440
 Duties and responsibilities File clerk. This was to have been a
"stopgap" until a job opened in the press section.
 Machines and equipment you used

Place Wilmington, Delaware
 From 31 1934 To 5 1935
 Name of employer:
Wilmington Morning News
 Address Orange & Girard Streets
 Kind of business or organization:
Newspaper
 Number and class of employees you supervised
 Name and title of your immediate supervisor
Came to Washington, D. C.
 Reason for leaving

Exact title of your position Correspondent, Space Salary: Starting, \$
reporter Per Final, \$ rates
 Duties and responsibilities Covered second largest town in State,
college, sports, society, news, etc. Wrote editorials.
Occasionally covered conventions and filled in on city
beats during this time; also worked for other papers,
including by-line features for large syndicate.
 Machines and equipment you used

Place
 From 19 To 19
 Name of employer:
 Address
 Kind of business or organization:
 Number and class of employees you supervised
 Name and title of your immediate supervisor
 Reason for leaving

Exact title of your position Salary: Starting, \$
 Per Final, \$
 Duties and responsibilities Have been working since I was 9 years
old; various sales jobs, etc. Not listed because they
are not important and I couldn't remember them, anyway.
 Machines and equipment you used

38. Do you hold any elective or appointive office, Federal, State, or local? Yes No
If so, give details under Item 45.

39. Do you receive any pension or other benefit (exclusive of Adjusted Service Certificate) for military or naval service, or an annuity from the U. S. Government under any Retirement Act? Yes No
If so, give details under Item 45.

40. Show name and address of wife's (or husband's) employer (if none, write "None"):

41. (a) Were any of the following members of your family born outside Continental U. S. A.? Father. Mother. Wife. Husband. Yes No

If so, indicate which by marking the appropriate box, and show under Item 45 for each, (1) full name, including maiden name of wife or mother; (2) birthplace; (3) native citizenship; and (4) if U. S. naturalized, date of naturalization.

(b) Have you any relatives, by blood or marriage (excluding persons in the U. S. armed forces), now living in a foreign country? Yes No

If so, for each relative show under Item 45 the (1) name, (2) relationship, (3) place of residence, (4) birthplace, and (5) present citizenship.

42. List any special skills not shown in Question 36, such as operation of short-wave radio, multilith, key-punch, turret-lathe, or scientific or professional devices:

SKILL Editor SKILL Short-wave radio

SKILL Investigator SKILL _____

Words per minute in typing _____; stenography _____

Do you have a license to operate an automobile? Yes No

43. State what kind of work you prefer Work that might help win the war

44. Give (a) professional or technical societies and other associations of which you are a member and which indicate your qualifications (do not include fraternal, religious, or political associations); (b) scholastic honors, academic societies, and significant college activities; (c) your more important publications (do not submit copies unless requested); (d) your patents or inventions; (e) hobbies, construction of instruments, and other voluntary semi-vocational skills; (f) any special qualifications not covered elsewhere in your application.

Anti-Nazi and patent exposes written and investigated beginning over a year ago have, without exception, all been followed by governmental action, including Congressional investigations (both Houses), grand jury investigations, etc. Made much material, affidavits, photos and photostats, available to Congressional committees, government agencies and departments, etc.

45. Space for detail answers to other questions:

Question No.	Answer
16a	<u>Poor vision, sacroiliac condition, infectious arthritis, chronic sinusitis, etc.</u>
16b	<u>As a result of overwork (occupational and scholastic) while in college I was caught by doctors "on the verge of a nervous breakdown" from which I recovered completely in a comparatively short while, so question was answered in affirmative, although I have never had an actual nervous breakdown.</u>
20	<u>J. D. Cohn, 1601 West Huntingdon Street Philadelphia, Pennsylvania; cousin; General Accounting Office.</u>
41a	<u>Both born in Russia; both left when they were small children. Both naturalized citizens (father dead). Mother's maiden name Sarah Spiegel. Don't know any of other information requested.</u>
41b	<u>Can't answer; don't know, but if there are, they are not close relatives.</u>

If more space is required, use a sheet of THIN paper, size 8 x 10 1/4 inches. Write on each sheet your name, date of application, and examination title (if any). Use one side only. Enclose, unattached, with application.

If you claim preference for the Indian Service as an Indian, you must file with this application a certificate from the superintendent of the Indian agency where you are registered, or from the Commissioner, Bureau of Indian Affairs, showing that you have at least one-fourth Indian blood.

JURAT (OR OATH).—This jurat (or oath) must be executed.

The following oath must be taken before a notary public, the secretary of a United States civil service board of examiners, or other officer authorized to administer oaths, before whom the applicant must appear in person. The following are among those not authorized to administer this oath: Postmasters (except in Alaska), Army officers, post-office inspectors, and chief clerks and assistant chief clerks in the Railway Mail Service.

The composition and work in connection with any material required to be submitted for this examination are entirely my own, except where I have given full credit for quoted matter or the collaboration of others by quotation marks and references, and in the composition of the same I have received no assistance except as indicated fully in my explanatory statement.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in answer to the foregoing questions are full and true to the best of my knowledge and belief, SO HELP ME GOD.

If female, prefix "Miss" or "Mrs." and if married use your own given name, as "Mrs. Mary L. Doe."

(Signature of applicant) _____
(Sign WITH PEN AND INK your name—one given name, initial or initials and surname)

Subscribed and duly sworn to before me according to law by the above-named applicant this _____ day of _____, 19____, at city [or town] of _____ county of _____, and State [or Territory or District] of _____

(Signature of officer) _____
(Official title) _____