

# Osan AB Summer Hire Program Application

## Student Background Information

1. Student Name (Last, First, MI):	2. Student SSN:	3. DOB (MM/DD/YYYY):
4. Home Telephone:	5. Cell Phone:	6. E-mail Address:
7. Mailing Address:		

## Sponsor Information

8. Sponsor's Name (Last, First, MI):	9. Sponsor's DODID:	10. Sponsor's DEROS:
11. Work Telephone:	12. Cellphone:	13. Sponsor's Organization:
14. Sponsor's Military Email:	(Optional) Spouse's Cellphone:	

## Education

15. Education Level: <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> College Student	
16. If you are in College, where are you attending?	17. What is your Major?

## Special Skills

18. Have you ever worked for a Summer hire Program at Osan AB? <div style="text-align: center;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>	21. In the space provided, please indicate your future career field.	
19. Do you have any medical conditions that would prohibit you from working outdoors? <div style="text-align: center;"> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </div>		
20. Please indicate which position you are interested in: <div style="text-align: center;"> <input type="checkbox"/> Laborer    <input type="checkbox"/> Clerk         </div>	22. Student Signature:	23. Date Signed

## CPF USE ONLY

Date Submitted: _____	Confirmation Email: _____	RPA No.: _____
<input type="checkbox"/> Clerk	Org/Assignment : _____	
<input type="checkbox"/> Laborer		

**SEE REVERSE SIDE FOR PARENTAL CONSENT TO WORK AND SCHOOL CERTIFICATION**

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## Parental Consent to Participate in Youth Employment

**\*\*Must be completed by your Sponsor/Parent\*\***

24. Sponsor's Status

- Active Duty Militay
- DOD Civilian (Includes GSWG, NAF, DODDS Teachers, and AAFES Employees)
- Others (please explain)

25. Working Conditions: My Child has my permission to perform the following duties:

- Clerical Jobs only (usually in an office setting)
- Labor Jobs only (non-skilled, non-hazardous work such as cutting grass, painint, light lifting)
- Both Clerical and Labor

26. I  do authorize  do not authorize my dependent child to receive emergency medical care. (Understand that this applies to those situations which are job realted injuries)

26. Relationship to Child: \_\_\_\_\_

27. Sponsor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## School Certification

28. The student identified in this application is a full time student at:

29. Current Grade (circle): 7 8 9 10 11 12 Date of graduation (if a senior): \_\_\_\_\_

30. School Official Name, position and Signature:

## Application Checklist

Before you submit your FULL and COMPLETE application by the submission dates provided on page 3.

- Osan AB Summer Hire Program Application
  - Parental Consent
  - School Certification
- Resume (is required)
- Copy of Sponsor's Orders
- Letter of Employment (Dependents of Civilian Employees only)
- Copy of Physical Exam (cannot be older than 1 year)
- Copy of Social Security Card or previous year's tax form (see below for statement)
- Copy of Applicant's Passport (Pages with picture and SOFA Stamp)
- College Students* : Letter from Registrar Stating you are full-time student for the Fall

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## Privacy Act Statement

**AUTHORITY: EO 9397**

**PRINCIPAL PURPOSE:** ELIGIBILITY DETERMINATION FOR Youth Employment Programs. Verficiation of relationship and dependency. Verification of Social Security Number and U.S. Citizenship.

**DISCLOSURE:** We request your SSN to keep your record staight. Other people may have the same name. As allowed by law or presidential Directive, we use your SSN to seek informabnout about you, schools, banks, and other who know yo. disclosure of the requested information in this application is coluntary. However, failure to provide complete and accurate information may result in denial of employment.

## **Osan AB Civilian Personnel Contact Information**

Osan AB Civilian Personnel  
51 FSS/FSC  
Building 936, Room 112  
Tel: 050-5784-4218  
Email: Osan.SummerHire@us.af.mil  
(applications submitted via email will not be accepted)

## **Submission Information**

**Please submit your FULL and COMPLETED application to our office in-person during the following times:**

**Date: 27 Apr 2026 - 08 May 2026**  
**Time: 08:00 to 15:00**

*As a reminder, your application has Personal Identifying Information (PII) and should be protected!*

## **Timeline**

**Last day to submit applications: 08 May 2026**

**Entry on Duty: 15 June 2026**  
**Last day: 24 Jul 2026**

By submitting this application, you (and your guardian) understand that if your sponsor is PCS-ing before the Summer Program is complete, you will submit a letter of resignation to your supervisor.