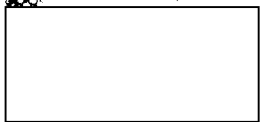


~~SECRET~~
(When Filled In)



QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING, TYPE OR PRINT, AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444j, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room [redacted] Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I BIOGRAPHIC AND POSITION DATA

EMP. SER. NO. [redacted]	NAME (Last-First-Middle) COLLINS, Charles P.	DATE OF BIRTH 12/28/16
-----------------------------	--	----------------------------------

SECTION II EDUCATION HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Country)	YEARS ATTENDED (From-To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO
---------------------------	--------------------------------	--------------------------	--

COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM--TO--	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/QTR. HRS. (Specify)
	MAJOR	MINOR				
1.						
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1.				
2.				

SECTION III MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:

2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)

3. DATE OF BIRTH

4. PLACE OF BIRTH (City, State, Country)

5. OCCUPATION

6. PRESENT EMPLOYER

7. CITIZENSHIP

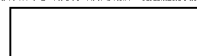
8. FORMER CITIZENSHIP(S) COUNTRY(IES)

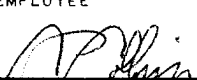
9. DATE U.S. CITIZENSHIP ACQUIRED

APPROVED FOR RELEASE
DATE: DEC 2007

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE				
2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE				



SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	OFFICE OF PERSONNEL DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY-- CHECK (X)			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
1.			MAY 9 1 25 PM '68				
2.							
SECTION VI TYPING AND STENOGRAPHIC SKILLS MAIL ROOM							
1. TYPING (WPM)	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED-- CHECK (X) APPROPRIATE ITEM.					
		<input type="checkbox"/> GREGG	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENOTYPE	<input type="checkbox"/> OTHER SPECIFY:		
SECTION VII SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.							
SECTION VIII MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?				2. NEW CLASSIFICATION			
<input type="checkbox"/> YES <input type="checkbox"/> NO							
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4. IF DEFERRED, GIVE REASON			
MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG		<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD		
		<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE	<input type="checkbox"/> AIR NATIONAL GUARD			
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK	3. EXPIRATION DATE OF CURRENT OBLIGATION					
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED							
5. MILITARY MOBILIZATION ASSIGNMENT				6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED			
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		DATE COMPLETED			
						RESIDENT	
						AGENCY-SPONSORED	
SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP					
		FROM	TO				
1.							
2.							
3.							
SECTION X REMARKS							
DATE		SIGNATURE OF EMPLOYEE					
6 April 68		 SECRET					

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS.

SECTION I		BIOGRAPHIC AND POSITION DATA		
1. EMP. SER. NO.	2. NAME (Last, First, Middle)	3. SEX	4. DATE OF BIRTH	5. SCHEDULE/GRADE/RIP
	COLLINS, CHARLES P		12/28/16	GS-16-06
6. SD	7. POSITION TITLE	8. OFFICE OF ASSIGNMENT	9. LOCATION (Country, City)	
	IG GENERAL CH	DDST	WASH, D, C	

SECTION II		AGENCY OVERSEAS SERVICE			
AREA	TYPE TOUR	FROM	TO		
	TDY: XX	50/85/01	50/88/01		
	POS: XX	51/09/01	51/10/01		
	TDY: XX	54/05/01	56/10/01		
	TDY: XX	58/04/01	58/05/01		
	TDY: 74	61/06/27	61/08/09		

OVERSEAS DATA
CODED
DATE: 3 Aug 67
INITIALS:

SECTION III		EDUCATION	
Degree	MAJOR FIELD	COLLEGE	YEAR
BAGM DCGT	PREMEDICINE, GENERAL PHILSOPHY, GENERAL	HOLY CROSS COL MASS GREGORIAN U ROME ITALY	38 40

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS.

SECTION I		BIOGRAPHIC AND POSITION DATA		
1. EMP. SER. NO.	2. NAME (Last, First, Middle)	3. SEX	4. DATE OF BIRTH	5. SCHEDULE/GRADE/RIP
	COLLINS, CHARLES P		12/28/16	GS-16-06
6. SD	7. POSITION TITLE	8. OFFICE OF ASSIGNMENT	9. LOCATION (Country, City)	
	IG GENERAL CH	DDST	WASH, D, C	

SECTION II		AGENCY OVERSEAS SERVICE			
AREA	TYPE TOUR	FROM	TO		
	TDY: XX	50/85/01	50/88/01		
	TDY: XX	51/09/01	51/10/01		
	POS: XX	54/05/01	56/10/01		
	TDY: XX	58/04/01	58/05/01		
	TDY: 74	61/06/27	61/08/09		

OVERSEAS DATA
CODED
DATE: 3 Aug 67
INITIALS:

SECTION III		EDUCATION	
Degree	MAJOR FIELD	COLLEGE	YEAR
BAGM DCGT	PREMEDICINE, GENERAL PHILSOPHY, GENERAL	HOLY CROSS COL MASS GREGORIAN U ROME ITALY	38 40

SECTION III **EDUCATION (Cont'd)**

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Country)	YEARS ATTENDED (from-To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO
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COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM -- TO --	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM / QTR. HRS. (Specify)
	MAJOR	MINOR				
1.						
2.						
3.						
4.						

5. IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

[Faint handwritten text, possibly "DUE TO ..."]

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1.				
2.				
3.				

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1.				
2.				
3.				
4.				
5.				

AGENCY-SPONSORED EDUCATION

Specify which, if any, of the education shown in Section III was Agency sponsored.

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1.				
2.				
3.				
4.				
5.				

SECTION VII **MILITARY SERVICE**

CURRENT DRAFT STATUS

1. ARE YOU REGISTERED FOR THE DRAFT? <input type="checkbox"/> YES <input type="checkbox"/> NO	2. SELECTIVE SERVICE CLASSIFICATION
---	-------------------------------------

3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS	4. IF DEFERRED, GIVE REASON
---	-----------------------------

MILITARY SERVICE RECORD (Active Duty Only)

1. MILITARY ORGANIZATION (Army, Navy, etc. - specify)	2. BRANCH OR CORPS	3. DATES OF SERVICE (extended active duty) FROM -- TO --
---	--------------------	---

4. STATUS (Regular, Reserve, etc. - specify)	5. RANK, GRADE OR RATE (at separation if past service)	6. SERIAL, SERVICE OR FILE NUMBER
--	--	-----------------------------------

7. CHECK TYPE OF SEPARATION	<input type="checkbox"/> HONORABLE DISCHARGE <input type="checkbox"/> RELEASE TO INACTIVE DUTY <input type="checkbox"/> RETIREMENT FOR AGE	<input type="checkbox"/> RETIREMENT FOR SERVICE <input type="checkbox"/> RETIREMENT FOR COMBAT DISABILITY <input type="checkbox"/> RETIREMENT FOR PHYSICAL DISABILITY	<input type="checkbox"/> UNDUE HARDSHIPS <input type="checkbox"/> OTHER (Specify)
-----------------------------	--	---	--

8. BRIEF DESCRIPTION OF MILITARY DUTIES (record the duties and skills which best describe your work or function in the military service).

MILITARY RESERVE, NATIONAL GUARD STATUS

CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG	<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD
	<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE		<input type="checkbox"/> AIR NATIONAL GUARD

1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK	3. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION
--------------------------------	--	--

4. CHECK CURRENT RESERVE CATEGORY	<input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED
-----------------------------------	---

5. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES (record the duties and skills which best describe your work or function in the military service).

6. IF YOU ARE CURRENTLY ASSIGNED TO A RESERVE OR NATIONAL GUARD TRAINING UNIT, IDENTIFY THE UNIT AND ITS ADDRESS.

MILITARY SCHOOLS COMPLETED (Active Duty, Reserve Status or as Civilian)

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	DATE COMPLETED	
1.			RESIDENT
			CORRESPONDENCE
2.			AGENCY-SPONSORED
			RESIDENT
3.			CORRESPONDENCE
			AGENCY-SPONSORED
4.			RESIDENT
			CORRESPONDENCE
5.			AGENCY-SPONSORED
			RESIDENT
			CORRESPONDENCE
			AGENCY-SPONSORED

SECTION IV GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY -- CHECK (X)			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT

SECTION V TYPING AND STENOGRAPHIC SKILLS

1. TYPING (WPM) 2. SHORTHAND (WPM) 3. INDICATE SHORTHAND SYSTEM USED -- CHECK (X) APPROPRIATE ITEM:
 GREGG SPEEDWRITING STENOTYPE OTHER-SPECIFY:

4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (comptometer, mimeograph, card punch, etc.)

SECTION VI SPECIAL QUALIFICATIONS

1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.

2. EXCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4, SECTION V, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (indicate CW speed, sending & receiving) OFFSET PRESS, TURRET LATHE, EDP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES.

3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC.? YES
 NO

4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registry number if known)

5. FIRST LICENSE/CERTIFICATE (year of issue)

6. LATEST LICENSE/CERTIFICATE (year of issue)

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (do NOT submit copies unless requested). INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (non-fiction or scientific articles, general interest subjects, novels, short stories, etc.)

8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED.

9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE.

SECTION VIII.

AGENCY EMPLOYMENT HISTORY

1. INCLUSIVE DATES <i>(From-To-by month & year)</i>	2. LOCATION <i>(Country, City)</i>	3. DIRECTORATE-OFFICE OR DIVISION, BRANCH
4. TITLE OF JOB		5. GRADES HELD IN JOB
6. DESCRIPTION OF DUTIES		

1. INCLUSIVE DATES <i>From- To- by month & year</i>	2. LOCATION <i>(Country, City)</i>	3. DIRECTORATE-OFFICE OR DIVISION, BRANCH
4. TITLE OF JOB		5. GRADES HELD IN JOB
6. DESCRIPTION OF DUTIES		

1. INCLUSIVE DATES <i>(From-To-by month & year)</i>	2. LOCATION <i>(Country, City)</i>	3. DIRECTORATE-OFFICE OR DIVISION, BRANCH
4. TITLE OF JOB		5. GRADES HELD IN JOB
6. DESCRIPTION OF DUTIES		

SECTION VIII			AGENCY EMPLOYMENT HISTORY (Cont'd)		
1. INCLUSIVE DATES (From-To-by month & year)		2. LOCATION (Country, City)		3. DIRECTORATE-OFFICE OR DIVISION, BRANCH	
4. TITLE OF JOB			5. GRADES HELD IN JOB		
6. DESCRIPTION OF DUTIES					
1. INCLUSIVE DATES (From-To-by month & year)		2. LOCATION (Country, City)		3. DIRECTORATE-OFFICE OR DIVISION, BRANCH	
4. TITLE OF JOB			5. GRADES HELD IN JOB		
6. DESCRIPTION OF DUTIES					
1. INCLUSIVE DATES (From-To-by month & year)		2. LOCATION (Country, City)		3. DIRECTORATE-OFFICE OR DIVISION, BRANCH	
4. TITLE OF JOB			5. GRADES HELD IN JOB		
6. DESCRIPTION OF DUTIES					

