
Investiture of the Honorable Roger J. Miner

The Honorable Roger J. Miner '56 Papers

Summer 8-2-1985

Appointment Affidavits

Roger J. Miner, '56

Follow this and additional works at: https://digitalcommons.nyls.edu/miner_investiture

APPOINTMENT AFFIDAVITS

United States Circuit Judge

August 2, 1985

(Position to which appointed)

(Date of appointment)

United States Court of Appeals Second Circuit

Albany, New York

(Department or agency)

(Bureau or division)

(Place of employment)

I, Roger J. Miner, do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter. So help me God.

B. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof.

C. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing this appointment.

Roger J. Miner
(Signature of appointee)

Subscribed and sworn (or affirmed) before me this 2nd day of August, A.D. 1985,

at Albany

New York

(City)

(State)

[SEAL]

Joyce R. Scully
(Signature of officer)

Commission expires _____
(If by a Notary Public, the date of expiration of his Commission should be shown)

Clerk, U.S. District Court - N.D.N.Y.
(Title)

NOTE.—The oath of office must be administered by a person specified in 5 U.S.C. 2903. The words "So help me God" in the oath and the word "swear" wherever it appears above should be stricken out when the appointee elects to affirm rather than swear to the affidavits. Only these words may be stricken and only when the appointee elects to affirm the affidavits.

THIS IS A TRUE COPY

J. R. SCULLY

☆ U.S. G.P.O. 1983-381-526/8281

CLERK, U.S. DISTRICT COURT

BY Patricia Kullback

DEPUTY

DECLARATION OF APPOINTEE

(Data needed for appointment or conversion)

INSTRUCTIONS TO APPOINTEE: Answer all questions. Your answers will be considered together with other information in your record in determining your present fitness for Federal employment. A false statement or dishonest answer to any question may be grounds for dismissal after appointment or conversion and is punishable by law. Type, print or write legibly in ink. See Privacy Act Notice on reverse.

1. Name (Last—First—Middle) Miner, Roger J.	2. Birthplace (City and State, or Foreign Country) Hudson, New York	3. Birthdate 4/14/34
4. Present Address (Number, Street, City, State and ZIP Code) Box 110E, R.D. #2 Hudson, New York 12534	5. (A) In case of emergency, please notify Jacqueline A. Miner	(B) Relationship Wife
	(C) Number, Street, City, State, and ZIP Code Box 110E, RD #2, Hudson, NY	(D) Telephone (518) 828-6909

6. (A) Does the United States Government employ in a civilian capacity, any relative of yours (either by blood or marriage) with whom you live or have lived within the past 12 months?
 If "Yes," for each relative fill in the blank below. (If additional space is necessary, complete under Item 12.) Yes No

NAME	PRESENT ADDRESS (Including ZIP Code)	RELATIONSHIP	1. Department or agency in which employed 2. City and State, ZIP Code 3. Kind of appointment
			1. _____ 2. _____ 3. _____
			1. _____ 2. _____ 3. _____
			1. _____ 2. _____ 3. _____

(B) Have you any relative (by blood or marriage), not listed in answer to 6A, above, who works in a civilian or military capacity for the department or agency that is considering you for employment?
 If "Yes," for each such relative give in Item 12 full name, address (including ZIP Code), and relationship. Yes No

ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
7. Are you a citizen of the United States of America? If "No," give country of which you are a citizen: _____	X		10. Since the date you signed your qualifications statement (or application) for this employment, have you:		
8. Do you receive or do you have a pending application for retirement or retainer pay, pension, or other compensation based upon military, federal civilian, or District of Columbia government service? If your answer is "Yes," give details in Item 12.		X	A. Been fired from employment for any reason?		X
9. Since the date you signed your qualifications statement (or application) for this employment, have you:			B. Quit a job after being informed that your employer intended to fire you for any reason?		X
A. Been convicted of an offense against the law or forfeited collateral, or are you now under charges for any offense against the law: (You may omit: (1) traffic violations for which you paid a fine of \$30.00 or less; (2) any offense committed before your 18th birthday which was finally adjudicated in a juvenile court or under a youth offender law; (3) any conviction the record of which has been expunged under Federal or State law; and (4) any conviction set aside under the Federal Youth Corrections Act or similar State authority.)		X	C. Been discharged from the Armed Services under other than honorable conditions? (You may omit any such discharge changed to honorable or general by a Discharge Review Board or similar authority.) If your answer to A, B or C is "Yes" give details in Item 12. Show the name, address (including ZIP Code) of employer, approximate date, and reason in each case.		X
B. Been convicted by general court-martial while in the military service? If your answer to A or B is "Yes," give details in Item 12. Show for each offense, (1) date, (2) charge, (3) place, (4) court, and (5) action taken.		X	11. Have you been employed by the Federal Government before this employment? If "Yes," answer the following:	X	
			A. Since January 1968 have you filed a waiver of regular insurance coverage under the Federal Employees' Group Life Insurance Program?		X
			B. If you filed such a waiver, has it been cancelled?		
			C. Since January 1968 have you ever elected optional insurance coverage under the Federal Employees' Group Life Insurance Program?	X	
			D. If you made such an election, has it been cancelled?		X

12. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)

Item No.	Item No.

CERTIFICATION.

I certify that all of the answers to the questions above are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

Signature of appointee (Sign in INK) **Roger J. Miner** Date signed **8/5/85**

APPOINTING OFFICER: Enter date of appointment or conversion _____ → Date appointed or converted _____

PRIVACY ACT NOTICE

AUTHORITY

This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), December 31, 1974, for individuals completing Federal employment forms. Sections 1302, 3301, and 3304 of Title 5 of the United States Code give the U.S. Civil Service Commission the authority to evaluate applicants' qualifications for employment in the Federal service. Use of the employment application forms is necessary for performing these functions.

PURPOSES AND USES

The principal purpose of the Declaration of Appointee, Standard Form 61-B, is to collect information needed to determine suitability of applicants for Federal employment and of current Federal employees for reassignment, reinstatement, transfer or promotion. Your completed Declaration is used to determine if you are entitled to employment under certain laws, regulations and restrictions based on citizenship, members of families already employed, and residence requirements. The Declaration is used to update application questions and to identify past history of Federal life insurance. All or part of your completed Declaration form may be disclosed outside the U.S. Civil Service Commission to:

1. Federal agencies upon request for a list of eligibles to consider for appointment, reassignment, reinstatement, transfer, or promotion.
2. State and local government agencies, congressional offices, public international organizations, and other public offices, if you have indicated availability for such employment consideration.
3. Federal agency investigators to determine your suitability for Federal employment.
4. Federal, State, or local agencies to create other personnel records after you have been appointed.
5. Appropriate Federal, State, or local law enforcement agencies charged with the responsibility of investigating a violation or potential violation of the law.
6. Appropriate Federal, State, or local agencies maintaining records on you to obtain information relevant to an agency decision about you.
7. A requesting Federal, State, or local agency to the extent the information is relevant to the requesting agency's decision.
8. Federal agency selecting officials involved with internal personnel management functions.
9. Anyone requesting statistical information (without your personal identification) under the Freedom of Information Act.
10. A congressional office in response to an inquiry from the congressional office made at your request.

EFFECTS OF NONDISCLOSURE

Because the employment application forms request both optional (other skills, training, etc.) and mandatory (qualifications and biographical, etc.) data, it is in your best interest to answer all questions. Omission of an item means you might not receive full consideration for a position in which this information is needed.

INFORMATION REGARDING DISCLOSURE OF YOUR SOCIAL SECURITY NUMBER UNDER PUBLIC LAW 93-579, SECTION 7(b)

Disclosure by you of your Social Security Number (SSN) is mandatory to obtain the services, benefits, or processes that you are seeking. Solicitation of the SSN by the United States Civil Service Commission is authorized under provisions of Executive Order 9397, dated November 22, 1943. The SSN is used as an identifier throughout your Federal career from the time of application through retirement. It will be used primarily to identify your records that you file with the Civil Service Commission or agencies. The SSN also will be used by the Civil Service Commission and other Federal agencies in connection with lawful requests for information about you from your former employers, educational institutions, and financial or other organizations. The information gathered through the use of the number will be used only as necessary in personnel administration processes carried out in accordance with established regulations and published notices of systems and records. The SSN also will be used for the selection of persons to be included in statistical studies of personnel management matters. The use of the SSN is made necessary because of the large number of present and former Federal employees and applicants who have identical names and birth dates, and whose identities can only be distinguished by the SSN.