

# Superior Court of California County of Calaveras

400 Government Center Drive San Andreas, California 95249

www.calaveras.courts.ca.gov

#### **EMPLOYMENT APPLICATION**

#### **PLEASE NOTE:**

• A separate application is required for each position.

I.

 Type or print in ink. considered.

- Complete all items on both sides of the application.
- Incomplete or illegible applications will not be

You are responsible for notifying the Calaveras Superior Court of any changes to your address or telephone number.

**GENERAL INFORMATION** 

Position Applying For:					DATE:			
LAST NAME:			NAME:			M:		
Address:		•						
Сіту:				STATE:			ZIP:	
Home Phone No:	CELL PHONE NO:		WORK PHONE NO: EM			MAIL:		
LIST OTHER NAMES YOU HA	VE USED:							
DO YOU FLUENTLY SPEAK A	LANGUAGE OTHER THAN E	NGLISH?	IF YES, SPECI	FY:				
Provide detailed information include verifiable voluntee requirement to complete to please attach additional shape EMPLOYER'S NAM	r experience if it is relevan this section. Statements su leets. Former employers m	nt to the j ich as 'Se	job. Resumes e Attached Re	may be attached esume' will not be eference.	but will ı	not replace	the space is needed	
DUTIES:								
SUPERVISOR'S NAME & PI	HONE:							
REASON FOR LEAVING:								
MAY WE CONTACT THIS EM	IPLOYER?							
IF "No", WHY NOT?								
	1							

Employer's Name & Address		EMPLOYM	MENT DATES	JOB TITLE	
		FROM	То		
DUTIES:					
SUPERVISOR'S NAME & PHONE:					
REASON FOR LEAVING:					
MAY WE CONTACT THIS EMPLOYER?					
IF "No", WHY NOT?					
Employer's Name & Addri	ESS	EMPLOYM	MENT DATES	JOB TITLE	
		FROM	То		
DUTIES:					
SUPERVISOR'S NAME & PHONE:					
REASON FOR LEAVING:					
May we contact this employer?					
IF "No", WHY NOT?					
IF NO , WHI NOT:					
EMPLOYER'S NAME & ADDRESS		EMPLOYM	MENT DATES	JOB TITLE	
		FROM	То		
DUTIES:					
SUPERVISOR'S NAME & PHONE:					
REASON FOR LEAVING:					
MAY WE CONTACT THIS EMPLOYER?					
IF "No", WHY NOT?					

	III. MISCELLANEOUS INFORMATION						
	READ FULLY. ANSWER BY CHECKING YES OR NO.	YES	NO				
	Do you have the legal right to work in the United States? (Court hires only U.S. citizens and aliens						
1	nuthorized to work in the United States. All new employees will be required to complete an I-9 form						
-	and provide documentation establishing identity and employment eligibility within three (3) days of						
	nire.)						
	Have you ever been discharged, rejected during probation, or resigned under pressure or unfavorable						
-	circumstances from any job or employment within the past ten years? If so, explain in section 8.						
3	Do you have a valid driver's license to operate a motor vehicle in California?						
	Type: DL# State:						
4	lave you ever applied for this position before with the Calaveras Superior Court?						
5	Have you ever been employed by Calaveras Superior Court or any other Court? If yes, list details in						
	ection 8						
1 h	Do you have relatives employed by Calaveras Superior Court? If so, list names and relationship in						
	ection 8.						
	Please check the types of employment you are willing to accept:						
-	full Time Part Time Temporary						
	Jse this space to clarify any of the above.						
8							

IV. EDUCATION, SKILLS, AND TRAINING										
NAME, LOCATION, COURSE OF STUDY				DATES			ι	Units/Degree		
College or University:			Fre	M:					_(QTR/SEM)	
				To:			DEGREE:			
College or University	·:		FRO	M:			UNITS:		(QTR/SEM)	
				To:			DEGREE:			
Graduate School:			FRO				Units:		(QTR/SEM)	
				To:			·			
Business or Trade Scl	hool:		FRO				I INUTC:		_(QTR/SEM)	
business of fraue sci	1001.								_(QTR/ SEW)	
				To:						
Do you have a High S	chool Dip	loma or G.E.D	certificate?				Yes		No	
If not, what is the hig	ghest grad	e completed?					-1			
If the position for wh	-		-		-	iren	nents ind	licat	ed in the job	
description, list the o	-		•	nts				1		
Institution w	here Acqu	ired and Cours	se Title	Length of Course			urse		Date Completed	<u>k</u>
List valid lice		•								
Type Lic/Cert	Issuii	ng Agency	ency Reg. No or ID No.		D	ate Issue	ed	Expiration Da	ate_	
V DEPENDENCES (C'						,ho				
<b>V. REFERENCES</b> (Give names, titles, addresses and telephone numbers of three persons we may contact who are familiar with your competencies as they relate to this position.)										
ľ				y Name / Address					Telephone #	
			-							

#### **IMPORTANT NOTICE TO APPLICANTS:**

## ONLY COMPLETE APPLICATIONS WILL BE CONSIDERED. PLEASE REVIEW YOUR APPLICATION TO ENSURE ALL QUESTIONS ARE ANSWERED.

### INITIAL EACH PARAGRAPH BELOW YOU AGREE TO AND SIGN AT THE BOTTOM.

· · · · · · · · · · · · · · · · · · ·	ed in this application is true and complete to the best of my isleading information may result in disqualification from the eras Superior Court, if hired. (Initials)
to my suitability for employment. I grant permission for a	eferences, work history, education, and any other factors related my current or previous employers, educational institutions, and eras Superior Court, releasing them from any liability for sharing
he Department of Motor Vehicles. I also grant permissio imited to a criminal history record check, and release all	ny Driver's License information for a driving record check with on to obtain additional information as needed, including but not sources from any liability in providing such information. In all rules, regulations, and policies of Calaveras Superior Court.
have attached additional pages to this Employen formation in this application and the attached pages is t	ment Application. I declare, under penalty of perjury, that all true and correct. (Initials)
Date	Signature of Applicant (sign in ink)