

# SUPERIOR COURT OF CALIFORNIA, COUNTY OF DEL NORTE EMPLOYMENT APPLICATION

An Equal Opportunity Employer

Human Resources 450 H Street, Room 209, Crescent City CA 95531 (707) 464-8115 x109

www.delnorte.courts.ca.gov

OFFICE USE ONLY					
A  Reason  Date  Date					
By:					

Instructions: Please	e <b>complete all</b> It in blue or black ink.	TITLE OI	TITLE OF POSITION FOR WHICH YOU ARE APPLYING:			
<ol><li>Notify the Hu</li></ol>	ıman Resources & Labor Relations Bureau					
of any change	e of address or phone number.	L				
NAME						
ADDRESS						
CONTACT NUMBERS	HOME PHONE  CELLULAR PHONE		WORK PHONE  EMAIL ADDRESS			
IF YOU ARE NOW EMPLOYED BY SUPERIOR COURT	CURRENT STATUS  JOB TITLE					
ELIGIBILITY	Have you ever been convicted of a felony.  Yes No	misdemeanor or	If yes, please give date and details:			
ELIGIBILITY	CAN YOU, UPON EMPLOYMENT, P. THE UNITED STATES? Yes	ROVIDE PROOF (	OF IDENTITY AND PI	ROOF OF ELIGIBILITY TO WORK IN		
	SPECIAL S Related to or required b applying.	KILLS AND ABIL by the position fo	ITIES or which you are			
OMPUTER KNOW						
			=\/2=4			

PROGRAM	NAME OF SOFTWARE/APPLICATIONS	TYPES OF DOCUMENTS	LEVEL OF EXPERTISE (Limited, Proficient or Expert)
WORD PROCESSING			
SPREADSHEETS			
COURT MANAGEMENT SYSTEMS			
EMAIL/INTERNET			

# **EDUCATION**

HIGH SCHOOL EDUCATION								
Highest Grade Completed	☐ GRA	ADUATED	GED					
	COLLEGE/UNIVERSITY							
TYPE OF DEGREE NAME COLLEGE/UNIV		COURSE OF STUDY/MAJOR	# OF YEARS COMPLETED	DEGREE AWARDED? YES NO	LAST YEAR OR YEAR DEGREE AWARDED			
JOB-RE	LATED ACADEMI	C, TECHNICAL OR \	OCATIONAL TRA	AINING				
NAME AND LOCATION OF INSTITUTION	TITLE OR DES	SCRIPTION OF PROGR						
PROFESSIO Related	to or required b	ALS (LICENSES, CER by the position for	TIFICATES, REGIS which you are	TRATIONS)				
NAME OR DESCRIPTION	ISSUING A	GENCY OR SERIAL #		ISSUE DATE	EXPIRATION DATE			
				Į.				
		ENT HISTORY - PAID						
Beginning with your most recent job, list all jobs that you believe may be related to the position for which you are applying. Careful describe all experience, paid or unpaid, which shows how you meet the minimum qualifications as stated in the job announcement. you need more space, attach additional sheets. If you are or were employed in an organization in which you held multiple position please list each job title separately. <b>Completion of this section is required</b> however, you may also attach a résumé if desired.								
From (Mo/Yr) Current (Most Re	ecent) Employer	Jo	b Title		# of Staff Supervised By You			
To (Mo/Yr)  Regular Hrs/Week Street or Mailing Address		Ci	City/State/Zip Code					
Supervisor's Name					Phone Number			
Why did you Leave		<u> </u>						
Duties								

### **EMPLOYMENT HISTORY - PAID, UNPAID**

Beginning with your most recent job, list all jobs that you believe may be related to the position for which you are applying. Carefully describe all experience, paid or unpaid, which shows how you meet the minimum qualifications as stated in the job announcement. If you need more space, attach additional sheets. If you are or were employed in an organization in which you held multiple positions, please list each job title separately. **Completion of this section is required** however, you may also attach a résumé if desired.

From (Mo/Yr)	Employer	Job Title	# of Staff Supervised
To (Mo/Yr)			By You
Regular Hrs/Week	Street or Mailing Address	City/State/Zip Code	
Supervisor's Name	,	Supervisor's Title	Phone Number
Why did you Leave			
Duties			
From (Mo/Yr)	Employer	Job Title	# of Staff Supervised
			By You
To (Mo/Yr)  Regular Hrs/Week	Street or Mailing Address	City/State/Zip Code	
Supervisor's Name	,	Supervisor's Title	Phone Number
Why did you Leave			
Duties			
<u> </u>			
From (Mo/Yr)	Employer	Job Title	# of Staff Supervised
	Employer	Job Title	# of Staff Supervised By You
From (Mo/Yr)  To (Mo/Yr)  Regular Hrs/Week	Employer Street or Mailing Address	Job Title City/State/Zip Code	# of Staff Supervised By You
To (Mo/Yr)			# of Staff Supervised By You  Phone Number
To (Mo/Yr)  Regular Hrs/Week		City/State/Zip Code	By You
To (Mo/Yr)  Regular Hrs/Week  Supervisor's Name		City/State/Zip Code	By You
To (Mo/Yr)  Regular Hrs/Week  Supervisor's Name  Why did you Leave		City/State/Zip Code	Phone Number  # of Staff Supervised
To (Mo/Yr)  Regular Hrs/Week  Supervisor's Name  Why did you Leave  Duties  From (Mo/Yr)	Street or Mailing Address	City/State/Zip Code Supervisor's Title	Phone Number
To (Mo/Yr)  Regular Hrs/Week  Supervisor's Name  Why did you Leave  Duties	Street or Mailing Address	City/State/Zip Code Supervisor's Title	Phone Number  # of Staff Supervised
To (Mo/Yr)  Regular Hrs/Week  Supervisor's Name  Why did you Leave  Duties  From (Mo/Yr)  To (Mo/Yr)	Street or Mailing Address  Employer	City/State/Zip Code Supervisor's Title  Job Title	Phone Number  # of Staff Supervised
To (Mo/Yr)  Regular Hrs/Week  Supervisor's Name  Why did you Leave  Duties  From (Mo/Yr)  To (Mo/Yr)  Regular Hrs/Week	Street or Mailing Address  Employer	City/State/Zip Code Supervisor's Title  Job Title  City/State/Zip Code	Phone Number  # of Staff Supervised By You

# ADDITIONAL EMPLOYMENT INFORMATION

SIGNATURE OF APPLICANT	DATE
I certify that I have read, fully understand and accept all terms of	of the foregoing Applicant Statement.
I understand that any offer of employment I receive may be completion of a background investigation which may include cr	ontigent upon passing a job-related physical, drug test and/or satisfactory riminal and financial information.
to the best of my knowledge and belief a	d documents of this employment application is accurate, complete and true and may be subject to verification. I understand that by result in denial of employment or used for disciplinary action, including
PLEASE READ BEFORE SIGNING.	
APPLICANT STATEMENT	
Is there any other job-related information you want us to know about you?	
In your current job, have you ever written instructions or directions to be followed by employees or customers? If yes, please explain.	
If not address on the previous page, have you ever been fired or asked to resign from a job? If yes, please explain.	
Explain any gaps in your employment, other than those due to personal illness, injury or disability.	

### REASONABLE ACCOMMODATION DURING EXAM PROCESS

If you require accommodation in the examination process because of a disability, please call (707) 464-8115 ext. 109 to discuss your needs.

RECRUITING SOURCE						
HOW DID YOU LEARN OF THIS OPEN POSITION?						
Superior Court Website		Newspaper		Employee	☐ Walk-In	
IF ONI	E OF THE FOLLOW	ING SOURCES LISTED	BELOW, PLEA	ASE SPECIFY:		
Posting in Non-Court Lo	cation:					
Newspaper:						
School/Career Placement	t Center:					
Publication or Organizati	ion whose primary	emphasis is diversity:				
Other:						
		CONFIDENTIAL INFO	RMATION			
be maintained separately from are referred for employment c						uivisions when you
Sex:		remate		Į		
		C GROUP (Please che	-		•	
and who maintain cultura					eoples of North A	merica,
ASIAN: All persons having area includes, for example			he Far East, Sou	utheast Asia or	the Indian Subco	ontinent. The
BLACK (Not of Hispanic	Origin): All person	ns having origins in any	of the Black rac	cial groups of	Africa.	
FILIPINO: All persons have	ring origins in the p	eoples of the Philippine	e Islands.			
HISPANIC: All persons of regardless of race.	Mexican, Puerto R	tican, Cuban, Central or	South America	an, or other Spa	anish culture or o	rigin,
NATIVE HAWAIIN OR PA	CIFIC ISLANDER:	All persons having orig	gins in any of the	e Hawaiian or l	Pacific Islands.	
WHITE (Not of Hispanic Middle East.	Origin): All person	ns having origins in any	of the original J	peoples of Eur	ope, North Africa	ı, or the
Decline to State						
ARE YOU AN INDIVIDUAL	WITH A DISABILIT	TY? Yes No				