SUPERIOR COURT OF CALIFORNIA, COUNTY OF LAKE
EMPLOYMENT APPLICATION

Human Resources
255 North Forbes Street, 4th Floor
Lakeport, CA 95453-4759
(707) 263-2374, x2263

JOB TITLE:_____

APPLICATION ESSENTIALS

- Applicants are required to complete a Superior Court Application. A resume will NOT be accepted in place of a completed application.
- Type or print in ink.
- The information you provide in this application will be used to verify and evaluate your job qualifications. An incomplete application or inaccurate information may disqualify you.
- Submit a typing certificate with a corrected rate of 45 words per minute or better.

_____
Last Name First Name Middle Name

_____
Previous Names: List any previous names under which you have worked, gone to school or served in the Armed Services

_____
Address City State Zip Code

Home Phone ( ) _____ Work ( ) _____

1. **HAVE YOU EVER BEEN, IN A COURT OF LAW OR MILITARY COURT, CONVICTED OF A CRIME? Do not include minor traffic citations, or juvenile offenses if the juvenile record has been sealed by court order. All Court employees will be fingerprinted and a record check conducted. A conviction will not automatically disqualify you, each case is considered on its merits.**
   ( ) YES ( ) NO

   ARE ANY CRIMINAL CHARGES PENDING AGAINST YOU?
   ( ) YES ( ) NO

   If YES to either of the above, give date, location, nature of offense, and if convicted the sentence. Use additional paper if necessary.

DATE	LOCATION	NATURE OF OFFENSE	SENTENCE

2. **HAVE YOU EVER BEEN FIRED OR ASKED TO RESIGN FROM EMPLOYMENT? If YES, please attach explanation on a separate piece of paper and include employers' names and dates of employment. ( ) YES ( ) NO**

3. **ARE YOU NOW OR HAVE YOU EVER BEEN EMPLOYED BY THE COURT OR COUNTY OF LAKE?**
   ( ) YES ( ) NO

4. **ARE YOU FLUENT IN ANY LANGUAGE IN ADDITION TO ENGLISH? If YES, please indicate your skills. If required you will be tested to certify your bilingual skill. ( ) YES ( ) NO**

   Language _____ ( ) Speak ( ) Write ( ) Read ( ) Understand

5. **DO YOU HAVE ANY RELATIVES OR A DOMESTIC PARTNER EMPLOYED BY THE COURT? There may be limitations on the employment of Father, Mother, Brother, Sister, Wife, Husband, Domestic Partner, or Child. Each case is considered separately for potential conflict of interest.**
   ( ) YES ( ) NO

   Name:_____ **Relationship:**_____ **Department:**_____

6. DO YOU HAVE A VALID CALIFORNIA DRIVER'S LICENSE? ( ) Yes If yes, Class_____ Number_____ ( ) No

7. LICENSES AND CERTIFICATES (STATE, PROFESSIONAL, TRADE, ETC. WHICH ARE REQUIRED BY THIS POSITION):

Description:_____ Issued by:_____ Expiration Date:_____ Number:_____

8. EDUCATION: High School Diploma: ( ) YES ( ) NO ( ) G.E.D. CERTIFICATE

NAME AND LOCATION OF COLLEGES OR SCHOOLS ATTENDED:	COURSE OF STUDY MAJOR	DEGREES, CERTIFICATES, UNITS

EXPERIENCE - Please account for all employment within the **last ten years**, beginning with your current or most recent position. **IF NECESSARY, PLEASE USE ADDITIONAL WORK EXPERIENCE ADDENDUM FORM.** In addition, please indicate any other experience that you think is relevant to the position for which you are applying (e.g., volunteer experience). RESUMES ARE WELCOME, BUT ARE NOT ACCEPTABLE AS A REPLACEMENT FOR THIS APPLICATION. Complete all requested information fully.

Name of Employer:	Employer Address:
Dates Employed From: To:	Position Title:
Hours per week: Monthly salary:	Description of Duties:
Reason for Leaving:	
Number of persons you supervised:	
Name of Supervisor:	
Phone: ( )	
May we contact this employer? ( ) YES ( ) NO	
Name of Employer:	Employer Address:
Dates Employed From: To:	Position Title:
Hours per week: Monthly salary:	Description of Duties:
Reason for Leaving:	
Number of persons you supervised:	
Name of Supervisor:	
Phone: ( )	
May we contact this employer? ( ) YES ( ) NO	

NOTICE: Employment with the Court may result in assignment to different work locations. In accepting employment with the Court you are consenting to assignment to and transfer between different work locations. DESIRED LOCATION: ( ) Lakeport ( ) Clearlake

In accordance with the Immigration and Control Act of 1986, employment of persons hired by the Superior Court will be contingent upon presentation by the employee of acceptable documents verifying identity and authorization for employment in the United States.

I understand the Court will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools and firms named therein, except my current employer, if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information. My signature affirms that all information on this application and attachments is true, complete and correct to the best of my knowledge. I understand that falsification of information, or misstatement or omission of fact may lead to the removal of my name from the eligibility list or termination from employment.

SIGNATURE_____ DATE_____

WORK EXPERIENCE ADDENDUM

Name of Employer:	Employer Address:
Dates Employed From: To:	Position Title:
Hours per week: Monthly salary:	Description of Duties:
Reason for Leaving:	
Number of persons you supervised:	
Name of Supervisor:	
Phone: ( )	
May we contact this employer? ( ) YES ( ) NO	

Name of Employer:	Employer Address:
Dates Employed From: To:	Position Title:
Hours per week: Monthly salary:	Description of Duties:
Reason for Leaving:	
Number of persons you supervised:	
Name of Supervisor:	
Phone: ( )	
May we contact this employer? ( ) YES ( ) NO	

Name of Employer:	Employer Address:
Dates Employed From: To:	Position Title:
Hours per week: Monthly salary:	Description of Duties:
Reason for Leaving:	
Number of persons you supervised:	
Name of Supervisor:	
Phone: ( )	
May we contact this employer? ( ) YES ( ) NO	

Name of Employer:	Employer Address:
Dates Employed From: To:	Position Title:
Hours per week: Monthly salary:	Description of Duties:
Reason for Leaving:	
Number of persons you supervised:	
Name of Supervisor:	
Phone: ( )	
May we contact this employer? ( ) YES ( ) NO	

EQUAL OPPORTUNITY EMPLOYER QUESTIONNAIRE

Your voluntary answers to this section will provide statistics needed for the Lake County Superior Court to evaluate its recruitment program as well as prepare statistical reports required by Federal and State agencies. This form will be detached from the employment application. The information contained on this form will be confidential and will NOT be used to make a decision about your employment.

POSITION APPLIED FOR:_____

( ) FEMALE ( ) MALE

ETHNIC GROUP – PLEASE CHECK ONE WHICH BEST IDENTIFIES YOU:

( ) WHITE (not of Hispanic origin): All persons not classified into one of five specific ethnic categories that follow.

( ) ASIAN or PACIFIC ISLANDER (other than Filipinos): All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Pacific Islands.

( ) BLACK (not of Hispanic origin): All persons having origin in any of the black racial groups.

( ) FILIPINO: All persons having origins in the peoples of the Philippine Islands.

( ) HISPANIC: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

( ) AMERICAN INDIAN or ALASKAN NATIVE: All persons having origins in any of the original peoples of North America.

HOW DID YOU FIND OUT ABOUT THIS JOB? (CHECK ONE OR MORE)

( ) LAKE COUNTY RECORD BEE

( ) INTERNET POSTING

( ) OTHER NEWSPAPER:_____

( ) COURT OR COUNTY EMPLOYEE ( ) FRIEND OR RELATIVE

( ) POSTING AT COURTHOUSE

( ) OTHER:_____