

# SUPERIOR COURT OF CALIFORNIA, COUNTY OF SISKIYOU

## EMPLOYMENT APPLICATION EQUAL OPPORTUNITY EMPLOYER Postmarks or Facsimiles NOT Accepted

Return To:  
Superior Court  
Personnel Department  
311 4th Street, Room 206  
Yreka, CA 96097

Phone: (530) 842-8394

Please type or print neatly in ink

Position applied for \_\_\_\_\_

Last Name	First Name	Initial	Home or Message Phone #
-----------	------------	---------	-------------------------

Mailing Address (Street or P.O. Box)	City	State	Zip Code	Business Phone #
--------------------------------------	------	-------	----------	------------------

List other names under which you have been employed	Social Security #
---	-------------------

Are you 18 yrs. of age or older?	Yes No	Are you a U.S. citizen?	Yes No	Federal law requires you to provide legal documentation permitting you to work at time of hire.	Yes	No
----------------------------------	-----------	-------------------------	-----------	---	-----	----

- A. Are you presently working for the Superior Court?  
If yes, Extra Help Regular Employment Agency  
Note position and department in section H.
- B. Have you worked for the Superior Court in the past?  
If yes, note position(s), department(s), and separation date(s) in section H.
- C. Have you any relatives employed by the Superior Court?  
If yes, list names, relationship, and department in section H.
- D. Have you applied for or are you receiving retirement benefits from the Public Employees Retirement System (PERS)?
- E. Were you ever discharged or forced to resign from a position? If yes explain in section H.
- F. Have you ever been convicted of an offense against the law or forfeited collateral? You may omit (1) Minor traffic violations and (2) any offense committed before your 18th birthday. If yes explain in the section H.
- G. Do you object to the Court making inquiry of your present employer?

The Superior Court requires you to be fingerprinted and your criminal and traffic records will be searched. Some applicants may be subject to drug testing.  
H. Use this space to explain any yes answers listed above, or for any other supplementary information. Attach additional sheets if necessary.

Certificates of professional or vocational competence, or licenses pertaining to position applied for. Attach addition sheets if necessary.				Bilingual Skills		
Type	State of Issue	Date Issued	Date Expires	Language Read	Speak	Write
Driver's License			Office machines and skills			
State	License #		Typing Speed	10 Key Speed		net strokes/pm
Class	Expiration Date		Software			

Indicate the type of work you would be willing to accept.

<b>PERMANENT</b>	<b>EXTRA HELP</b>	<b>SHIFTS</b>	
Full time	Full time	Days	Evenings
Part time	Part time	Weekends	Rotating

APPLICANTS INTERESTED IN EXTRA HELP WILL CONTINUE TO BE CONSIDERED FOR REGULAR PLACEMENT

**PERSONNEL DEPARTMENT ONLY**  
Application Review: Approved \_\_\_\_\_ Not Approved \_\_\_\_\_  
Date \_\_\_\_\_  
Date Stamp - Application Received

Do you have a high school diploma or G.E.D. Certificate? Yes No

Name & location of college or university attended	Major Course-work	Semester Units	Quarter Units	Degree Awarded

Business, Correspondence, Apprenticeship, Vocational, Trade or Service School, or Other Training Program	Courses Studied	Duration & Date Completed

EXPERIENCE: Begin with your latest position and list all employment during the last 10 years, including U.S. Military Service, self-employment and appropriate unpaid volunteer work. **THIS SECTION MUST BE COMPLETED EVEN IF YOU ARE SUBMITTING A RESUME.** It is not acceptable to just make reference to your resume or other attachments below. Additional sheets may be attached if needed. Incomplete applications will not be processed.

From To  Mo/Yr Mo/Yr Salary \$ Per Hours per week If still employed, may we contact? Yes No	Job Titles & Duties:    Number of People Supervised:	Employer:  Address:  Supervisor:  Phone: Reason for leaving:
From To  Mo/Yr Mo/Yr Salary \$ Per Hours per week If still employed, may we contact? Yes No	Job Titles & Duties:    Number of People Supervised:	Employer:  Address:  Supervisor:  Phone: Reason for leaving:
From To  Mo/Yr Mo/Yr Salary \$ Per Hours per week If still employed, may we contact? Yes No	Job Titles & Duties:    Number of People Supervised:	Employer:  Address:  Supervisor:  Phone: Reason for leaving:
From To  Mo/Yr Mo/Yr Salary \$ Per Hours per week If still employed, may we contact? Yes No	Job Titles & Duties:    Number of People Supervised:	Employer:  Address:  Supervisor:  Phone: Reason for leaving:

**CERTIFICATE OF APPLICANT (READ CAREFULLY BEFORE SIGNING)**

Recheck the Application to be sure it is complete and read the following carefully before signing. Applicant must personally sign. I hereby certify that all statements made in this application are true and I agree and understand that any misstatement or omission of material facts herein may cause forfeiture on my part to any employment or payment as an employee in the service of the Superior Court of California, County of Siskiyou. I further agree to be fingerprinted, upon employment and to furnish such proof of age as may be required. I hereby authorize representatives of the Superior Court of California, County of Siskiyou to contact (except as noted in G.) organizations, employers, schools and individuals listed for the purpose of establishing or verifying my qualifications, work history and work habits in connection with this application for Superior Court employment. I understand and acknowledge that such information will be used confidentially and for purpose of employment decisions only. I authorize the individuals or organizations contacted to release the above information to the Superior Court of California, County of Siskiyou.

Print Name:

Social Security #

Signature: \_\_\_\_\_

Date:

## THE SUPERIOR COURT APPLICANT CHARACTERISTICS QUESTIONNAIRE

All applicants are asked to voluntarily provide the following information. This section will be detached from your application prior to review and will be kept separately. All information provided is strictly confidential. The information you give, will assist The Superior Court in analyzing its recruitment program and in accurately compiling required statistical data for federal and state agencies. None of the information will be used to discriminate against or give preference to any individual.

DATE:

POSITION APPLIED FOR:

SEX: Male                  Female

ETHNIC ORIGIN:

White-Caucasian, Anglo-Saxon

Black-African Descent, Jamaican, Trinidadian, West Indian

Hispanic-Mexican, Chicano, Latin American, Spanish-Descent Cuban, Puerto Rican

Asian or Pacific Islander-Chinese, Japanese, Korean, Filipino

American Indian or Alaskan Native

HOW DID YOU HEAR ABOUT THIS JOB? (CHECK ONE OR MORE):

Newspaper or magazine ad (name publication)

A job announcement post (specify location)

An Internet posting (specify site)

Other (please indicate)