## SUPERIOR COURT OF CALIFORNIA, COUNTY OF SISKIYOU

EMPLOYMENT APPLICATION

Return To: Superior Court of CA 411 Fourth Street Yreka, CA 96097 Phone: (530) 842-0411

## **EQUAL OPPORTUNITY EMPLOYER**

**Postmarks or Facsimiles NOT Accepted** 

		Please type or print neat	iy in ink				
Position	applied for:						
Last Name		First Name	Initial		Home or Message Phone #		
Mailing Address (Street or P.O. Box)		City	State	Zip	Business Phone #		
List other names under which you have		n employed				Social Security-Last 4 digits (Optional)	
Are you of age of		eligible to work in the U.S. F		es you to provide legal mitting you to work at tim		,	
or age o	rolder: No re	<u>s110u</u>	ocumentation per	mitting you to work at tim	Yes	No	
A.	Are you presently working for the If yes, Extra Help Resolution and department in	gular Employmen	nt Agency 🗌				
B.	Have you worked for the Superior If yes, note position(s), department		) in section H.				
C.	Have you any relatives employed If yes, list names, relationship, and						
D.	Have you applied for or are you public Employees Retirement Sys		s from the				
E.	Were you ever discharged or fore	eed to resign from a position	n? If yes explain	in section H.			
F.	Have you ever been convicted of (1) Minor traffic violations and (in the section H.						
G.	Do you object to the Court making	ng inquiry of your present en	mployer?				
The Sup	perior Court requires you to be finge	erprinted and your criminal	and traffic records	s will be searched. Some a	pplicants m	ay be subject to drug testing.	
H. Use	this space to explain any yes answe	ers listed above, or for any o	ther supplementa	ry information. Attach add	litional shee	ets if necessary.	
applied for. Attach addition sheets if necessary.							
Driver's State Class	License # Typing Speed Expiration Date Sof		Office machines at 10 Key Speed	nd skills net strokes/pi	m		
PERMA Full time Part time	e 🔲 Full time 🔲	SHIFTS  Days	Evenings  Rotating	Application Review: Application Date Date Stamp - Application	proved		

BE CONSIDERED FOR REGULAR PLACEMENT

Do you have a	high school diploma	or G.E.D. Certificate? Yes	No 🗌	G	0 1 5
Name & location	on of college or univ	ersity attended	Major Course-work	Semeste Units	r Quarter Degree Units Awarded
	espondence, Apprent ce School, or Other T		Courses Studied	Durati	on & Date Completed
Trade of Service	to School, or Other 1	ranning i rogram			
unpaid volunte	er work. THIS SEC	TION MUST BE COMPLETI	nt during the last 15 years, including ED EVEN IF YOU ARE SUBMI	ITTING A RESUME. It	is not acceptable to just make
From	To	Job Titles and Duties:	eets may be attached if needed. In		Imployer:
Mo/Yr	Mo/Yr			A	address:
	Hours per wk				upervisor: hone:
If still amploye	d, may we contact?			_	leason for leaving:
Yes No	a, may we contact:	Number of people supervised			
From	То	Job Titles and Duties:		E	mployer:
Mo/Yr	Mo/Yr			A	address:
					upervisor:
	Hours per wk				hone: leason for leaving:
If still employed Yes ☐ No ☐	d, may we contact?	Number of people supervised			Ţ.
From	То	Job Titles and Duties:		E	mployer:
Mo/Yr	Mo/Yr			A	Address:
					upervisor:
	Hours per wk				hone: leason for leaving:
If still employed, may we contact? Yes \( \subseteq \text{No} \subseteq \)		Number of people supervised			C
From	То	Job Titles and Duties:		E	mployer:
Mo/Yr	Mo/Yr			A	ddress:
	Hours per wk				upervisor: hone:
T6 -4:111	-			R	leason for leaving:
Yes No No	d, may we contact?	Number of people supervised			
From	То	Job Titles and Duties:		E	mployer:
Mo/Yr	Mo/Yr			A	ddress:
	Hours per wk				upervisor: hone:
If still amployed	-			R	leason for leaving:
If still employed, may we contact? Yes ☐ No ☐		Number of people supervised			

## 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 statement 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:	SS# - Last 4 digits (Optional):
Signature:	Date:

Submit Application, Resume & Cover Letter to: Personnel@siskiyou.courts.ca.gov