



NORTH CAROLINA JUDICIAL DEPARTMENT

North Carolina Administrative Office of the Courts

APPLICATION FOR EMPLOYMENT

Please type or print.

(SSN Voluntary for Record-Keeping and Data Processing Only)

NOTICE:

1. The State employs only U.S. citizens or aliens who can provide proof of identity and work authorization within three working days of employment.
2. Persons subject to military selective service registration must certify compliance to be eligible for state employment (G.S. 143B-421.1). See availability block.

WHEN COMPLETING THIS APPLICATION, PLEASE MAKE SURE YOU:

1. Print or type.
2. Give complete information on your education and work history. ("See Resume" is not acceptable.)
3. List separately each job held and your duties for each position.
4. Check for accuracy. Sign and date your application.

NOTE: If you forget to complete some part of this Application or do not include requested information (except the Equal Employment Opportunity Information which is voluntary), your application may not be considered.

The North Carolina Judicial Department is an Equal Opportunity Employer.

Click <http://www.nccourts.org/Surveys/HR/HTML/EEOSurvey.htm> to enter demographic information. The information requested is strictly voluntary and will in no way affect you as an applicant. Its sole use is to see how well our recruiting efforts are reaching all segments of the population.

Thank you for your interest in employment with the North Carolina Judicial Department. The Judicial System of North Carolina wants to attract the best qualified people available to serve its citizens. Applying for this vacancy does not imply that you will be interviewed or hired, but that you will be considered for vacancies based upon the stated job(s) for which you have applied.

Job Applied For			
Enter below the specific title and position number of the job for which you are applying.		Please indicate your referral source:	
_____		_____	
Social Security Number (last four digits only)	Last Name	First Name	Middle/Maiden Name
_____	_____	_____	_____
Address (Street Number And Name)		City	County
_____		_____	_____
State	Zip Code	Phone (Home Or Where You Can Be Reached) ()	Business Phone ()
_____	_____	_____	_____
Availability			
Do you now work for the State of N.C.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you related by blood or marriage to any person now working for the State? (If yes, give name, relationship to you and the agency where employed.) <input type="checkbox"/> Yes <input type="checkbox"/> No	
If not a U.S. citizen, are you eligible to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		_____	
If subject to military selective service registration, certify compliance by initialing dotted line _____			
Military Service			
Have you served honorably in the Armed Forces of the United States on active duty for reasons other than training?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you wish to declare a service-connected disability?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
At the time of this Application, are you the surviving spouse or dependent of a deceased veteran who died from service-related reasons?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you wish to declare eligibility for veteran's preference as the spouse of a disabled veteran?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Give dates of your (or spouse's) qualifying active military service:			
Entered: _____	Separated: _____	Branch: _____	Rank: _____
Are you a member of the Military Reserves? <input type="checkbox"/> Yes <input type="checkbox"/> No		Branch: _____	Rank: _____
AGENCY USE ONLY: ELIGIBILITY FOR VETERAN'S PREFERENCE: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Check the type of work you will accept:			
<input type="checkbox"/> 1. Permanent full-time	<input type="checkbox"/> 2. Permanent part-time	<input type="checkbox"/> 3. Temporary full-time	<input type="checkbox"/> 4. Temporary part-time
<input type="checkbox"/> 5. Any of the preceding	<input type="checkbox"/> 6. Work involving travel	<input type="checkbox"/> 7. Shift or split shift	<input type="checkbox"/> 8. Weekend work
If you are not available for work now, enter the earliest date you could begin work (mo/day/yr) _____			
Will you accept work anywhere in N.C.? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, list below the counties in which you would be willing to work.)			
1. _____	2. _____	3. _____	4. _____
5. _____			

Education

If you used a different name when enrolled at the college or university listed below, give name used and the institution involved.

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College 1 2 3 4 Graduate School 1 2 3 4
 Under S/Q Hrs., list the number of credit hours received and if they were semester (S) or quarter (Q) hours.

Schools	Name And Location	Date Attended (mo/yr) From To	Grad? <input type="checkbox"/> Yes <input type="checkbox"/> No	S/Q Hrs.	Major/Minor Course Work	Type Of Degree
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No			
College(s) University(s)			<input type="checkbox"/> Yes <input type="checkbox"/> No			
Graduate or Professional			<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other educational, voca- tional school, intern- ships, etc.			<input type="checkbox"/> Yes <input type="checkbox"/> No			

List special training programs and seminars you have completed in the last five years:

If the job(s) applied for calls for specific courses, indicate those courses taken and credits received:

Current professional status: (list fields of work for which you have been registered)

Registration: _____ State: _____ No.: _____
 Registration: _____ State: _____ No.: _____

List membership in professional, honorary or technical societies:

FOR AOC USE ONLY

Degrees and Professional Credentials
 Have been verified
 Will be verified within 90 days (G.S. 126-30)
 Person Responsible: _____

Professional licenses and certifications (list, giving dates and sources of issuance):

Skills

Check the following skills, experience, etc. which you have:

- Driver's license # _____ State _____
- Foreign language (specify) _____
- Computer software (i.e., dBase, spreadsheets, etc.) _____
- Word processing (specify WPM) _____
- Shorthand/speedwriting (specify WPM) _____
- Legal transcription
- Other _____

Criminal History

Have you ever been convicted of an offense against the law other than a minor traffic violation? (A conviction does not mean you cannot be hired. The offense and how recently you were convicted will be evaluated in relation to the job for which you are applying.) Yes No (If yes, explain fully on an additional sheet.)

Do you have any pending charges in either civil or criminal court? (Having pending charges does not mean you cannot be hired.) Yes (If yes, explain fully on an additional sheet.) No

Work History (include volunteer experience) Use the Continuation Page if necessary

Current Or Last Employer		Address				
Job Title		Supervisor's Name		Telephone No. ()	No. Supervised By You	
Date Employed (mo/yr)	Starting Salary \$ per	Ending Salary \$ per	Reason For Leaving		May We Contact Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date Separated (mo/yr)	List major duties in order of their importance in the job:					
Full-Time	Years	Months				
Part-Time	Years	Months				
If part-time, no. of hours per week:						

Employer			Address			
Job Title			Supervisor's Name		Telephone No. ()	No. Supervised By You
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Part-Time	Years	Months				
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Use the continuation pages that follow to report additional work history.

Certification

I certify that I have given true, accurate and complete information on this form, including any continuation sheets, to the best of my knowledge. In the event confirmation is needed in connection with my work, I authorize educational institutions, associations, registration and licensing boards, and others to furnish whatever detail is available concerning my qualifications. I authorize investigation of all statements made in this application and understand that false information, false documentation, or failure to disclose relevant information may be grounds for rejection of my application, disciplinary action or dismissal if I am employed, and/or criminal action. I further understand that dismissal shall be mandatory if fraudulent information is given to meet position qualifications. (Authority: G.S. 126-30, G.S. 14-122.1).

I understand that Judicial Branch employees are not subject to the State Personnel Act. Judicial Branch employees serve "at the pleasure" of their hiring authorities. This means that employment may be terminated with or without cause and/or advance notice by either the employer or the employee. However, termination by the employer may not occur due to discrimination prohibited by law.

I understand that applicants for employment opportunities with the Judicial Branch of Government may be subject to state and national criminal and/or sex offender registry background searches as a condition of employment. If the position for which I am applying involves the collection or accounting of funds, a credit check may be conducted prior to my employment.

The Judicial Branch participates in E-Verify, an internet-based system operated by the US Department of Homeland Security (DHS) in partnership with Social Security Administration (SSA) that allows employers to electronically verify the employment eligibility of newly hired employees. E-Verify works by electronically comparing the information on an employee's Form I-9, Employment Eligibility Verification, with SSA and DHS records to verify the identity and employment eligibility of each newly hired employee. Applicants are urged to review information on the USCIS.gov website for E-Verify and Right to Work information.

If I am employed by an independent hiring authority within the Judicial Branch of Government, such as a judge, clerk of superior court, district attorney or public defender, I understand that I will serve at the pleasure of that official, that my employment may be terminated by that official without cause or notice, neither I nor the judicial official by whom I am employed is an employee of the Administrative Office of the Courts, and that the Administrative Office of the Courts has no authority over the hiring decisions or other employment practices of the judicial official by whom I am employed.

Signature Of Applicant (unsigned application will not be processed)

Date

CONTINUATION PAGE - APPLICATION FOR EMPLOYEMENT - Print this page ONLY if completed

Employer			Address			
Job Title			Supervisor's Name		Telephone No. ()	No. Supervised By You
Date Employed (mo/yr)		Starting Salary \$ per	Ending Salary \$ per	Reason For Leaving		May We Contact Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
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