FEDERAL JUDICIAL BRANCH APPLICATION FOR EMPLOYMENT

If you need additional space, continue under "Remarks" listing item number

	••••••••••••••••••				
1. Name (Last, First, Middle Initial)			2. Phone Number		
3. Present Address (Street, City, State, Zip)					
4. Email Address					
5. Other Names Previously Used for Employment Purposes			6. Date of Birth (complete only for law enforcement positions)		
		GENERAL			
7. Are you a U.S. Citizen?	YES	NO NO	If no, give the Country of your citizenship		
8. a. Were you ever a federal civilian employee?	YES	NO NO	If yes, give highest civilian grade: / / / / Grade / Step		
b. Are you receiving a federal civilian annuity payment?	YES	NO			
c. Are you receiving federal severance pay?	YES YES	NO NO	If yes, give former agency contact/telephone:		
d. Have you received a federal separation incentive payment in the past 5 years?	YES	NO NO	If yes, state mo/yr received and former agency contact/telephone:		
9. Do you have any relatives who are Judges, Officers or	YES	NO	If yes, give their names, positions, and relationships to you.		
employees of the United States Courts?					
10. Have you ever served on active duty with the military?	YES	NO NO	(If selected, you will need to provide your DD-214 (copy 4), Certificate of Release or Discharge from Active Duty, so that your service may be verified and credited)		
	BACKGRO	UND INFO	PRMATION		
BACKGROUND INFORMATION For questions 11, 12, and 13, your answers should include convictions resulting from a plea of nolo contendere (no contest), but omit (1) traffic fines of \$300 or less, (2) any violation of law committed before your 16 th birthday, (3) any violation of law committed before your 18 th birthday if finally decided in juvenile court or under a Youth Offender law, (4) any conviction set aside under the Federal Youth Corrections Act or similar state law, and (5) any conviction for which the record was expunged under Federal or state law.					
11. During the last 10 years, have you been convicted, imprisoned, on probation, or on parole? (<i>Include felonies, firearms or explosives violations, misdemeanors, and all other offenses</i>)	YES	NO NO	If yes, provide in Section 19 the date, explanation of violation, place of occurrence, and name/address of police dept or court.		
12. Have you been convicted by a military court-martial in the past 10 years?	YES YES	NO	If yes, provide in Section 19 the date, explanation of violation, place of occurrence, and name/address of military authority or court.		
13. Are you now under charges for any violation of law?	YES	NO	If yes, provide in Section 19 the date, explanation of violation, place of occurrence, and name/address of police dept or court.		
14. During the last 10 years, have you been fired from any job for any reason, did you quit after being told that you would be fired, did you leave any job by mutual agreement because of specific problems, or were you debarred from Federal employment by the Office of Personnel Management or any other Federal agency?	YES YES	NO NO	If yes, provide in Section 19 the date, explanation of problem, reason for leaving, and employer's name/address.		
15. Are you delinquent on any Federal debt? (Include delinquencies arising from Federal taxes, loans, overpayment of benefits, and other debts to the U.S. Government, plus defaults of Federally guaranteed or insured loans (e.g., student loan, home mortgage loan)).	YES	NO	If yes, provide in Section 19 the type, length, and amount of delinquency/default, and steps being taken to correct the error/repay the debt.		
	Ð	DUCATIO	N		
16. a. Do you have a high school diploma or G.E.D. equivalent?	YES	NO NO	If yes, Date of Completion		

P						
b. Name and location of colleges or universities		Credit Hours				Grade Point
attended (including law schools)	Dates Attended		~	Degree	Date Received	Average and/or
attended (including law schools)		Quarter	Semester			scholastic standing
16 a Other schools or training attended <i>dist name/location of scho</i>	al datas attanded au	hight studied	o outificator u	and and a	they require out data).	
16. c. Other schools or training attended (list name/location of scho	oi, aales allenaea, su	ojeci siuuieu, i	certificules re	cervea, ana o	iner perineni aaia).	
JOB RELATED SK	ILLS, AWARDS,	SPECIAL A	ACCOMPI	LISHMENT	TS	
17. List any skills (e.g., language, computer, keyboarding speed), ho	onors, awards, or spec	ial accomplish	ments (e.g.,	nemberships	in professional/honor	societies, leadership
activities, performance awards) that you believe are relevant to your	ability to perform the	job:		1	1	, I
	LICANTS FOR I	FCAL DOG	TIONS			
AP						
18. a. Are you admitted to the Bar?	YES	NO If yes,	list the Bar(s	to which adm	nitted and date(s) of a	dmission. If no, skip to
		18b.				
Is your Bar membership	ACTIVE	INACT	ΓIVE			
b. What was your scholastic standing in law school?	UPPER ¹ / ₂	UPPEF	2 1/2	UPPER 1/4		_
				011 ER /4		
c. Were you a member of an editorial board of law review or a	YES	No				
moot court participant?						
19. REMARKS (Use this space	for continuation of	f ana u oua I	ist the item	www.how.hoir	an analained)	
19. KEMAKKS (Ose this space	Jor continuation o	answers. L	asi ine ilem	number beli	ig explained.)	

WORK EXPERIENCE

(Start with your present position and work back 10 years. Include any military service. Use additional page if necessary.)

Α				
Dates of Employmen	nt (mm/dd/yyyy)	Number of hours worked per week:	Exact Title of Your Position	
From:	To:			
Salary or Earnings		Pay Plan/Grade (If in federal Service)	Place of Employment	
Starting \$	Per		City	
Final \$	Per		State	
Name and Address o	Name and Address of Employer (firm, organization, etc.)		Name and Title of Immediate Supervisor	
Business Telephone:	(Area Code and Phone Number)			
Reason for Leaving				
Description of Work				
1				

В

Dates of Employment	(mm/dd/yyyy)	Number of hours worked per week:	Exact Title of Your Position		
From:	To:				
Salary or Earnings		Pay Plan/Grade (If in federal Service)	Place of Employment		
Starting \$	Per		City		
Final \$	Per		State		
Name and Address of	Employer (firm, organization, etc.)	I	Name and Title of Immediate Supervisor		
Business Telephone: (2	Area Code and Phone Number)				
Reason for Leaving	Reason for Leaving				
Description of Work					

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С			
Dates of Employment (mm/dd/yyyy)		Number of hours worked per week:	Exact Title of Your Position
From:	To:		
Salary or Earnings		Pay Plan/Grade (If in federal Service)	Place of Employment
Starting \$	Per		City
Final \$	Per		State
Name and Address of Employer (firm, organization, etc.)			Name and Title of Immediate Supervisor
Business Telephone: (4)	rea Code and Phone Number)		
Business Telephone: (Area Code and Phone Number)			
Reason for Leaving			
Description of Work			

D

Dates of Employment (mm/dd/)	(עעע)	Number of hours worked per week:	Exact Title of Your Position	
From:	То:			
Salary or Earnings		Pay Plan/Grade (If in federal Service)	Place of Employment	
Starting \$	Per		City	
Final \$	Per		State	
Name and Address of Employer (firm, organization, etc.)			Name and Title of Immediate Supervisor	
Business Telephone: (Area Cod	de and Phone Number)			
Reason for Leaving				
Description of Work				

APPLICANT CERTIFICATION

I certify that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me, or firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated.

SIGNATURE

DATE SIGNED