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. Place of Birth (city/town, state, & country) (required for background investigation)			
6. Other Names Previously Used for Employment Purposes			7. Date of Birth (complete only for law enforcement positions)			
		GENERAL				
8. Are you a U.S. Citizen?	YES	NO	If no, give the Country of your citizenship			
9. a. Were you ever a federal civilian employee?	YES	NO	If yes, give highest civilian grade: Pay Plan Grade Step			
b. Are you receiving a federal civilian annuity payment?	YES	NO				
c. Are you receiving federal severance pay?	YES	NO	If yes, give former agency contact/telephone:			
d. Have you received a federal separation incentive payment in the past 5 years?	YES	NO	If yes, state mo/yr received and former agency contact/telephone:			
10. Do you have any relatives who are Judges, Officers or employees of the United States Courts?	YES	NO	If yes, give their names, positions, and relationships to you.			
11. Have you ever served on active duty with the military?	YES		selected, you will need to provide your DD-214 (copy 4), Certificate of Release or Discharge m Active Duty, so that your service may be verified and credited)			
	BACKGRO	OUND INFO	RMATION			
12. During the last 5 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	NO	If yes, provide in Section 18 the date, explanation of problem, reason for leaving, and employer's name/address.			
13. 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 18 the type, length, and amount of delinquency/default, and steps being taken to correct the error/repay the debt.			

			EDUCAT	TION				
14. a. Do you have a high school diploma or G.E.D. equivalent? YES NO								
b.	Name and location of colleges or universities		Dates Attended mm/dd/yyyy		Hours	Type of Degree (if applicable)	Date Received	Grade Point Average and/or
	attended (including law schools)	Start	Finish	Quarter	Semester	(** app,	4 , , , , ,	scholastic standing
			+ +					
15. Otl	her schools or training attended (list name/location of school	l, dates atter	nded, subject	studied, cert	tificates recei	ived, and other pertin	ent data):	
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	JOB RELATED S							
	st any skills (e.g., language, computer, keyboarding speed), hip activities, performance awards) that you believe are rele		_	_		g., memberships in pi	ofessional/honor	societies,
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	AP	PLICANT	S FOR LE	EGAL POS	SITIONS			
17. a.	Are you admitted to the Bar?	ES	NO	•		ne of Bar(s) and date(
ſ				Name Name	e of Bar: e of Bar:	:	Date	(mm/dd/yyyy):(mm/dd/yyyy):
b.	Is your Bar membership?	CTIVE	INACTIVI			name of Bar(s).		
ſ								(mm/dd/yyyy):(mm/dd/yyyy):
c.	What was your scholastic standing in law school?	PPER ½	UPPER 1/3	UPPER				·
d.	Were you a member of an editorial board of law review or a moot court participant?		No	0.1.2	L /4			
		- Company	·· ···································	6	Tital a ita	- hambaina a		
	18. REMARKS (Use this spa	ice for con	tinuation o	f answers.	List the iter	n number being ex	eplainea.)	
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WORK EXPERIENCE

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

A		
Dates of Employment (mm/dd/yyyy)	Number of hours worked per week:	Exact Title of Your Position
From: To:	Full-Time Part-Time	
Salary or Earnings	Pay Plan/Grade (If in federal Service)	Place of Employment
Starting \$ Per	(33	City
Final \$ Per		State
Name of Immediate Supervisor		Name of Employer (firm, organization, etc.)
Title of Immediate Supervisor		Address of Employer
Business Telephone: (Area Code and Phone Number)		
Reason for Leaving		
Description of Work		
В		
	Number of hours	
Dates of Employment (mm/dd/yyyy)	worked per week:	Exact Title of Your Position
From: To:	Full-Time Part-Time	
Salary or Earnings	Pay Plan/Grade (If in federal Service)	Place of Employment
Starting \$ Per		City
Final \$ Per		State
Name and of Immediate Supervisor		Name of Employer (firm, organization, etc.)
Title of Immediate Supervisor		Address of Employer
Business Telephone: (Area Code and Phone Number)		
Reason for Leaving		
Reason for Leaving Description of Work		

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

OPTIONAL BACKGROUND INFORMATION	N – R	ESPONI	D ON	LY IF	REQUIRED BY THE VACANCY ANNOUNCEMENT
contest), but omit (1) traffic fines of \$300 or less, (2) any violation o	f law o	committed	l befor	e your	rs should include convictions resulting from a plea of nolo contendere (no 16 th birthday, (3) any violation of law committed before your 18 th birthday if the Federal Youth Corrections Act or similar state law, and (5) any conviction
19. During the last 7 years, have you been convicted, imprisoned, on probation, or on parole? (Include felonies, firearms or explosives violations, misdemeanors, and all other offenses)		YES		NO	If yes, provide in Section 22 the date, explanation of violation, place of occurrence, and name/address of police dept or court.
20. Have you been convicted by a military court-martial in the past 7 years?		YES		NO	If yes, provide in Section 22 the date, explanation of violation, place of occurrence, and name/address of military authority or court.
21. Are you now under charges for any violation of law?		YES		NO	If yes, provide in Section 22 the date, explanation of violation, place of occurrence, and name/address of police dept or court.
	C			C	
22. REMARKS (Use this space	e jor c	continuat	ion oj	answe	ers. List the item number being explained.)
APPLICANT CERTIFICATION					
•	attacl	ned to thi	s app	lication	ched to this application is true, correct, complete and made in good in may be grounds for not hiring me, or firing me after I begin work, we may be investigated.
SIGNATURE					DATE SIGNED

VOLUNTARY RACE/ETHNICITY, GENDER, & DISABILITY IDENTIFICATION

(Please read the Privacy Statement and Specific Instructions before completing.)

Privacy Statement

You are being requested this information to assist the federal judiciary in planning, monitoring, and reporting equal employment opportunities and its supporting programs. Solicitation of this information is in accordance with Judicial Conference of the United States policy. Your furnishing this information is voluntary. There will be no impact on your application if you choose not to complete this form.

Specific Instructions: Please enter your name, position you are applying for, vacancy announcement number, location of position, identify your gender, disability status, and ethnicity. Select the race/national origin category with which you most closely identify. You may select more than one race/national origin category.

1. Name: (Last, First, MI)	
2. Position/ Vacancy #:	
3. Vacancy Location (Court, Court Unit, etc.)	
4. Gender: ☐ Female ☐ Male Non-binary	
5. Disability: Yes No	
6. Ethnicity: Hispanic Non-Hispanic Origin	
7. Race / National Origin: (select all that apply)	
☐ American Indian or Alaska Native	A person having origins with any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment. It includes people who identify as "American Indian" or "Alaska Native" and includes groups such as Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, and Nome Eskimo Community.
□ Asian	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, or Vietnam.
☐ Black/African American	A person having origins in any of the black racial groups in Africa.
☐ Native Hawaiian or Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
☐ White/Caucasian	A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
☐ Some Other Race	A person who does not identify with any of the provided race categories.

For Office Use Only:	
Department ID	