



15. **EMPLOYMENT HISTORY** (Resumes will **NOT** be accepted in place of this completed application)

List your most recent experience first.

List all experience, paid or volunteer, related to position applied for  
Use separate blocks for different positions with the same employer.

Explain any gaps between employment periods.

Additional sheets may be attached when necessary, but you must provide information in identical format.

<b>Period of Employment</b>  <b>From:</b> <b>To:</b> <b>Total</b> ___ Yrs. ___ Mos. <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <b>Hours Per Week:</b>	<b>Job Title and Most Important Duties Performed</b> <b>Title:</b> _____ <b>No. Supervised:</b> _____ <b>Duties:</b> _____	<b>Name and Address of Employer:</b>  <b>Immediate Supervisor:</b> <b>Telephone:</b> <b>Reason for Leaving:</b>
<b>Period of Employment</b>  <b>From:</b> <b>To:</b> <b>Total</b> ___ Yrs. ___ Mos. <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <b>Hours Per Week:</b>	<b>Job Title and Most Important Duties Performed</b> <b>Title:</b> _____ <b>No. Supervised:</b> _____ <b>Duties:</b> _____	<b>Name and Address of Employer:</b>  <b>Immediate Supervisor:</b> <b>Telephone:</b> <b>Reason for Leaving:</b>
<b>Period of Employment</b>  <b>From:</b> <b>To:</b> <b>Total</b> ___ Yrs. ___ Mos. <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <b>Hours Per Week:</b>	<b>Job Title and Most Important Duties Performed</b> <b>Title:</b> _____ <b>No. Supervised:</b> _____ <b>Duties:</b> _____	<b>Name and Address of Employer:</b>  <b>Immediate Supervisor:</b> <b>Telephone:</b> <b>Reason for Leaving:</b>
<b>Period of Employment</b>  <b>From:</b> <b>To:</b> <b>Total</b> ___ Yrs. ___ Mos. <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <b>Hours Per Week:</b>	<b>Job Title and Most Important Duties Performed</b> <b>Title:</b> _____ <b>No. Supervised:</b> _____ <b>Duties:</b> _____	<b>Name and Address of Employer:</b>  <b>Immediate Supervisor:</b> <b>Telephone:</b> <b>Reason for Leaving:</b>

16. May we contact the above employers:  Yes  No If no, indicate the one(s) you do not wish us to contact: \_\_\_\_\_

17. List three **professional** references:

<b>Name/Occupation</b>	<b>City/State</b>	<b>Telephone Number</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Note for applicants with disabilities.** If you require accommodations, please contact the Superior Court Administration Office at the time you submit this application. Reasonable adjustments will be made to accommodate you.

18. **PRIVACY STATEMENT AND CERTIFICATE OF APPLICANT** (Please read carefully before signing.)

I understand that the information I provide on this form will be used to determine whether I meet the requirements for this examination only and may serve as the basis for arriving at my final rating. I also understand and agree that providing the requested information is voluntary and that omission or distortion of any item may result in my qualifications not receiving full consideration, may disqualify me from participating further in the examination process or may result in my termination from employment. I understand that my employment is contingent upon verification of my U.S. citizenship or legal right to remain permanently in the United States. I further understand that employment is subject to a background, credit check and live scan.

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



**MARIPOSA COURT EEO/AA QUESTIONNAIRE**

The information on this questionnaire is voluntary but requested in accordance with Federal, State and County requirements. It is handled separately on a confidential basis for statistical purposes and not retained with your application. It will not be used to discriminate against or give preference to any individual in any personnel transaction.

ETHNIC CATEGORY	SEX::	Male	Female
1. White (Includes Indo-European, Pakistani, East Indian)			
2. Black (Includes African, Jamaican, Trinidadian, and West Indian)	AGE	Under 18	
	GROUP:		
3. Hispanic (Includes Mexican, Puerto Rican, Cuban, Latin American or Spanish)		Under 21	
		21 to 39	
4. Asian/Pacific Islander (Includes Japanese, Chinese or Korean)		40 to 65	
5. American Indian (Includes persons who identify themselves or are known as such by virtue of tribal association)		66 or older	
6. Other: _____			

DO YOU HAVE A DISABILITY THAT WOULD REQUIRE REASONABLE ACCOMMODATION?

Yes No

If yes, what accommodation would you need?

\_\_\_\_\_

PLEASE INDICATE BELOW HOW YOU BECAME AWARE OF THIS JOB OPPORTUNITY

Newspaper Ad (specify: \_\_\_\_\_)  
Jobs Available  
Other Publication (specify) \_\_\_\_\_  
Bulletin Board (where?) \_\_\_\_\_

Other County Employee  
Friend/Relative  
County Interest System (received notification by mail)  
Internet (specify which web site)  
\_\_\_\_\_