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	If no, give the Country of your citizenship					
8. 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	Tay Tian Grade Step					
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:					
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	(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)					
	BACKGROU	JND INFOR	MATION					
11. 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 17 the date, explanation of problem, reason for leaving, and employer's name/address.					
12. 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 17 the type, length, and amount of delinquency/default, and steps being taken to correct the error/repay the debt.					

EDUCATION								
13. a. Do you have a high school diploma or G.E.D. equivalent?		YES] NO					
b. Name and location of colleges or universities				Credit H	Hours			Grade Point
attended (including law schools)	Date	es Attended	Qι	ıarter	Semester	Degree	Date Received	Average and/or scholastic standing
	-		-					
	-		+					
	<u> </u>							
14. c. Other schools or training attended (list name/location of school, dates attended, subject studied, certificates received, and other pertinent data):								
JOB RELATED SK	ILLS.	AWARDS	SPE	CIAL A	ACCOMP	LISHMENT	rs_	
15. List any skills (e.g., language, computer, keyboarding speed), ho								r societies, leadership
activities, performance awards) that you believe are relevant to your				1			r	, 1
APP	LICA	NTS FOR I	LEGA	L POS	ITIONS			
16. a. Are you admitted to the Bar?			NO			s) to which adr	nitted and date(s) of a	admission. If no, skip to
	_			18b.		,		-
Is your Bar membership	П	ACTIVE		INACTI	TVE			
b. What was your scholastic standing in law school?		UPPER ½		UPPER		UPPER 1/4		
			NI.	UPPER	. 73	UPPER /4		
c. Were you a member of an editorial board of law review or a moot court participant?		YES	No					
17. REMARKS (Use this space	e for co	ontinuation (of ansv	vers. Li	ist the item	ı number beii	ng explained.)	
	<i></i>						<u> </u>	

WORK EXPERIENCE

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

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

Dates of Employment (mm/dd/	(איניאי)	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 \$			State
Name and Title of Immediate S	Supervisor		Name and Address of Employer (firm, organization, etc.)
Business Telephone: (Area Coo	de and Phone Number)		
Reason for Leaving			
Description of Work			
D			,
Dates of Employment (mm/dd/	(איציצי)	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
Salary or Earnings Starting \$	Per		Place of Employment City
	Per		
Starting \$	Per		City
Starting \$Final \$	Per		City State
Starting \$ Final \$ Name and Title of Immediate \$	Per		City State
Starting \$ Final \$ Name and Title of Immediate \$ Business Telephone: (Area Cod	Per		City State
Starting \$ Final \$ Name and Title of Immediate S Business Telephone: (Area Coo Reason for Leaving	Per		City State
Starting \$ Final \$ Name and Title of Immediate S Business Telephone: (Area Coo Reason for Leaving	Per		City State
Starting \$ Final \$ Name and Title of Immediate S Business Telephone: (Area Coo Reason for Leaving	Per		City State

OPTIONAL BACKGROUND INFORMATION	N – R	ESPONI	D ON	LY IF	REQUIRED BY THE VACANCY ANNOUNCEMENT
Answer questions 18, 19, and 20, only if required by the vacancy contest), but omit (1) traffic fines of \$300 or less, (2) any violation o	anno f law	uncement committed	. You l befor	r answe	ers should include convictions resulting from a plea of nolo contendere (no 16th birthday, (3) any violation of law committed before your 18th birthday if r the Federal Youth Corrections Act or similar state law, and (5) any conviction
18. 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 21 the date, explanation of violation, place of occurrence, and name/address of police dept or court.
19. Have you been convicted by a military court-martial in the past 7 years?		YES		NO	If yes, provide in Section 21 the date, explanation of violation, place of occurrence, and name/address of military authority or court.
20. Are you now under charges for any violation of law?		YES		NO	If yes, provide in Section 21 the date, explanation of violation, place of occurrence, and name/address of police dept or court.
	C			2	
21. REMARKS (Ose iiis space	e jor c	onunuau	ion oj	answe	ers. List the item number being explained.)
APPLICANT CERTIFICATION					
THI ELEKTICE CONTROLLED					
· · · · · · · · · · · · · · · · · · ·	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