

**EMPLOYMENT APPLICATION**

JD-ES-11 Rev. 9/2000

**STATE OF CONNECTICUT  
JUDICIAL BRANCH**

www.jud.state.ct.us

*This application may be made available in an alternate format upon request by a qualified individual with a disability under the provisions of the Americans with Disabilities Act. If you need assistance, please contact the Recruitment Section of the Human Resource Management Unit at (860)722-1610.*

**AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER**

**INSTRUCTIONS**  
1. Type or print in ink.  
2. Answer all questions completely.

POSITION(S) APPLYING FOR \_\_\_\_\_ DATE OF APPLICATION \_\_\_\_\_

<b>NAME AND ADDRESS</b>	NAME OF APPLICANT ( <i>Last, first, middle</i> )	HOME PHONE ( <i>with area code</i> )	BUSINESS PHONE ( <i>with area code</i> )
	ADDRESS		

NAME OF HIGH SCHOOL	CITY AND STATE	<input type="checkbox"/> "X" here if you are a high school graduate or have received an equivalency diploma.
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Please list all schools you have attended since high school. (*Technical, Business, College, or other*)

EDUCATION	NAME OF SCHOOL	CITY AND STATE	MAJOR SUBJECT	DID YOU GRADUATE?	DEGREE RECEIVED

List here only the employment that you believe qualifies you for the position(s) you are applying for. List all other experience in the next section. Begin with PRESENT or MOST RECENT employment and work backwards. If additional space is required, attach an additional sheet using the same format.

**1** NAME AND ADDRESS OF EMPLOYER (*City and state*)

TELEPHONE ( <i>with area code</i> )	JOB TITLE	NAME OF IMMEDIATE SUPERVISOR		
SALARY OR WAGE \$ _____ PER _____	HOURS PER WEEK	EMPLOYED FROM ( <i>Mo., yr.</i> )	TO ( <i>Mo., yr.</i> )	TOTAL ( <i>Years, months</i> )
DUTIES ( <i>Include knowledge, skills and abilities required</i> )				

**2** NAME AND ADDRESS OF EMPLOYER (*City and state*)

TELEPHONE ( <i>with area code</i> )	JOB TITLE	NAME OF IMMEDIATE SUPERVISOR		
SALARY OR WAGE \$ _____ PER _____	HOURS PER WEEK	EMPLOYED FROM ( <i>Mo., yr.</i> )	TO ( <i>Mo., yr.</i> )	TOTAL ( <i>Years, months</i> )
DUTIES ( <i>Include knowledge, skills and abilities required</i> )				

**3** NAME AND ADDRESS OF EMPLOYER (*City and state*)

TELEPHONE ( <i>with area code</i> )	JOB TITLE	NAME OF IMMEDIATE SUPERVISOR		
SALARY OR WAGE \$ _____ PER _____	HOURS PER WEEK	EMPLOYED FROM ( <i>Mo., yr.</i> )	TO ( <i>Mo., yr.</i> )	TOTAL ( <i>Years, months</i> )
DUTIES ( <i>Include knowledge, skills and abilities required</i> )				

<b>GENERAL EXPERIENCE</b>	List all other experience. Account for all time since school.					
	<b>DATE (Mo., Yr.)</b>		<b>NAME OF EMPLOYER</b>	<b>ADDRESS (City, State)</b>	<b>JOB TITLE</b>	<b>SALARY</b>
	<b>FROM</b>	<b>TO</b>				

<b>OTHER KNOWLEDGE, SKILLS AND ABILITIES</b>	List relevant knowledge, skills and abilities you have acquired in the above employment.
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<b>ADDITIONAL INFORMATION</b>	1. Have you ever been convicted of a criminal offense or an offense against military law? (Exclude minor traffic violations or any offense settled in a juvenile court or under a youthful offender law.) <input type="checkbox"/> YES <input type="checkbox"/> NO IF SO, GIVE DETAILS (Use additional sheet if necessary)
	2. Have you ever been discharged from a job? <input type="checkbox"/> YES <input type="checkbox"/> NO IF SO, PLEASE EXPLAIN
	3. May we contact your present and past employers for information about your duties? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, PLEASE EXPLAIN
	4. Have you ever worked for another branch of government or state agency? <input type="checkbox"/> YES <input type="checkbox"/> NO IF SO, INDICATE WHICH OFFICE(S) AND DATES OF EMPLOYMENT (If not indicated above)

<b>LICENSES AND CERTIFICATES</b>	List here any licenses or certificates you may hold, which are valid and in good standing.			
	<b>NAME OR DESCRIPTION</b>	<b>ISSUED BY</b>	<b>DATE</b>	<b>NUMBER</b>

<b>CERTIFICATION</b>	I certify that the statements made by me on this application are COMPLETE and TRUE to the best of my knowledge and belief and are made in good faith and I have not withheld pertinent information. I understand that if I knowingly make any misstatement of facts, I am subject to disqualification or dismissal and to such other penalties as may be prescribed by law or Judicial Branch policies. I also understand that application and appointment to a temporary position is no guarantee of appointment to a permanent position. <i>Read this application and your answers CAREFULLY before signing.</i>	
	SIGNED (Applicant)	DATE SIGNED

<b>IMPORTANT NOTICE</b>	All offers of employment are contingent on the production of proper documents verifying your eligibility for employment pursuant to the Immigration Reform and Control Act, a federal law. You will be required to produce these documents within the first three days of employment. At your request, the interviewer will inform you concerning the type of documents that will be required. You may also be subject to a criminal history background check.
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