

FRANKLIN COUNTY MUNICIPAL COURT

Application for Employment

375 South High Street, 10th Floor Columbus, Ohio 43215



(A resume may be attached but may not be used as a substitute for completing this application.)

APPLICANT INFORMATION

Date: _____

Name: _____
First Middle Last

Current Address: _____

City State Zip Code

How long have you lived at this address: _____ *If less than 6 months, list previous address below*

Previous Address: _____

City State Zip Code

Primary Phone: _____ Secondary Phone: _____

What position are you applying for?: _____

How did you hear about this position?: _____

EDUCATION

High School Name: _____ Years Completed: _____

Address: _____

Course of Study or Major: _____

Diploma/Degree Received: _____

EDUCATION CONTINUED

College Name: _____ Years Completed: _____

Address: _____

Course of Study or Major: _____

Diploma/Degree Received: _____

College Name: _____ Years Completed: _____

Address: _____

Course of Study or Major: _____

Diploma/Degree Received: _____

College Name: _____ Years Completed: _____

Address: _____

Course of Study or Major: _____

Diploma/Degree Received: _____

College Name: _____ Years Completed: _____

Address: _____

Course of Study or Major: _____

Diploma/Degree Received: _____

EMPLOYMENT HISTORY

List present and past employment, beginning with the most recent. If title or duties changed significantly in the course of service with an employer, indicate such changes clearly as a separate employment. Include any military service, indicating rank and specialty. Significant, long-term volunteer work may also be included.

Company: _____

Type of Business: _____ Job Title: _____

Address: _____

City

State

Zip Code

Supervisor's Name _____

Reason for leaving: _____

Responsibilities: _____

Dates of Employment: _____ May we contact this employer? YES NO

Company: _____

Type of Business: _____ Job Title: _____

Address: _____

City

State

Zip Code

Supervisor's Name _____

Reason for leaving: _____

Responsibilities: _____

Dates of Employment: _____ May we contact this employer? YES NO

EMPLOYMENT CONTINUED

Company: _____

Type of Business: _____ Job Title: _____

Address: _____

City

State

Zip Code

Supervisor's Name _____

Reason for leaving: _____

Responsibilities: _____

Dates of Employment: _____ May we contact this employer? YES NO

Company: _____

Type of Business: _____ Job Title: _____

Address: _____

City

State

Zip Code

Supervisor's Name _____

Reason for leaving: _____

Responsibilities: _____

Dates of Employment: _____ May we contact this employer? YES NO

TRAINING AND OTHER QUALIFICATIONS

List any training relevant to the position for which you are applying, other than in an academic setting already listed above, below in or on an attachment. Include the type of training, subjects covered, length, and organization that provided the training.

List any additional information or special qualifications relevant to the position for which you are applying. Include special machines or equipment you operate, hobbies or life experiences from which you have gained relevant skills, or other information you want to be considered.

PROFESSIONAL REFERENCES

Name: _____ Occupation: _____
Company: _____ Phone Number: _____
Address: _____



Name: _____ Occupation: _____
Company: _____ Phone Number: _____
Address: _____



Name: _____ Occupation: _____
Company: _____ Phone Number: _____
Address: _____

MISCELLANEOUS

The following information will be used only if it is directly related to the position for which you are applying.

	Yes	No
1. Do you have a valid Ohio driver's license?	<input type="checkbox"/>	<input type="checkbox"/>
2. If necessary, can you supply your own transportation for work use?	<input type="checkbox"/>	<input type="checkbox"/>
3. Can you perform all the required tasks/duties as described in the job description?	<input type="checkbox"/>	<input type="checkbox"/>
4. Are you able to work during the hours required for the position for which you are applying?	<input type="checkbox"/>	<input type="checkbox"/>
5. Are you proficient in any language other than English?	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you ever been employed by a court system?	<input type="checkbox"/>	<input type="checkbox"/>
7. Do you have any commitments to another employer or personal activity that might affect or cause a conflict of interest with employment with this Court?	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you related by blood or marriage, up to and including second cousin to a judge or an employee of this Court?	<input type="checkbox"/>	<input type="checkbox"/>
9. As an employee of this court, you may have access to probation and criminal records. Do you have any close relatives, friends, or anyone with whom you live who is currently facing criminal or traffic charges, or is on parole or probation, with any court in Franklin County?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered "No" to questions 1, 2, 3, or 4, or if you answered "Yes" to questions 5, 6, 7, 8, or 9, explain fully below, indicating by number the question to which you are responding. Attach an additional sheet if necessary. A "Yes" or a "No" answer to any of the above questions does not automatically disqualify you from employment with this Court.

PLEASE REVIEW YOUR APPLICATION AND READ THE FOLLOWING STATEMENTS CAREFULLY.

If at any time during the course of your employment, an investigation of the Court, or of a judge or employee of the Court takes place, you could be asked to assist in the investigation, including taking a polygraph (lie detector) test. If you are asked, you have the right to refuse to assist in an investigation because information you provide could be used against you if criminal charges against you result from the investigation. However, if you are asked but refuse to assist in an investigation, your refusal will be grounds for immediate termination.

By completing and submitting this application, I affirm that the statements made in this application are complete and accurate. I understand that any false or misleading statement on this application may result in my dismissal, if I am hired, subject me to criminal prosecution, or both.

I authorize the Franklin County Municipal Court to verify the information in this application, including conducting an investigation of my personal or employment history (including contacting former employers and supervisors), education, criminal and traffic records, or credit history through any investigative agencies of its choice. I hereby waive all provisions of law forbidding schools or colleges that I attended, or any past employers from disclosing any knowledge or information relevant to my employment and hereby consent that they may disclose such knowledge or information to this Court.

Applicant Name

Date