## 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.	

EDUCATION									
14. a.	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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I									
	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					
D.					
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 <sup>th</sup> birthday, (3) any violation of law committed before your 18 <sup>th</sup> 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

## District of Kansas Supplemental Application Form

Name:			Date:	
Position for which you are applyi	ng:			
Can you travel if a job requires it	? Never	Occasionally	Often	
Salary requirements:				
How did you hear about this job:				
List any foreign language skills ar	nd identify your level (	i.e. conversation	al only, written fluency):	
Check all applicable skills:				
Typing, WPM	Transcription		Legal Documentation	
CM/ECF	MS Office		Lotus Notes	
Other Skills/Software:				
As a condition of employment, all arrest record. This background so Additionally, appointment or pro not limited to credit history, inte	II employees undergo creening requires fing motion to some posit rviews with friends ar nt Officer positions al	a background so erprint submissions may required d family of the e so require a med	reening, including a lifetime criminal on to the Federal Bureau of Investiga e additional investigations, including employee, and an employment histor lical evaluation and drug and alcohol stigations?	ntions but ry and
of the Judiciary. This includes but activities, adhering to appropriat	t is not limited to avoi e standards in perfori	ding impropriety of the	s uphold the integrity and independer and the appearance of impropriety e office, engaging in certain behavior al activity. The Code of Conduct is	in all

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available upon request at ksd\_recruitment@ksd.uscourts.gov. Do you have any concerns about your ability to

adhere to the Code?