



NEW YORK STATE
Unified Court System

Application for Employment

Mail the application to the individual indicated on the employment announcement. You are encouraged to enclose a resume and cover letter.

TITLE OF POSITION	ANNOUNCEMENT NUMBER
NAME (LAST, FIRST, MIDDLE)	SOCIAL SECURITY NUMBER
MAILING ADDRESS	PHONE
CITY, STATE, ZIP	
E-MAIL ADDRESS	
ARE YOU CURRENTLY RECEIVING A GOVERNMENT PENSION? <input type="checkbox"/> YES <input type="checkbox"/> NO	

EDUCATION

SCHOOL	DID YOU GRADUATE?		NAME AND LOCATION	TOTAL CREDITS EARNED	MAJOR SUBJECT	DEGREE EARNED
	YES	NO				
HIGH SCHOOL / GED						
COMMUNITY / COLLEGE / UNIVERSITY						
GRADUATE / PROFESSIONAL						
OTHER						

LIST ANY LICENSES, CERTIFICATIONS AND SPECIAL SKILLS.

HAVE YOU EVER BEEN DISCIPLINED BY, OR ARE CHARGES PRESENTLY PENDING BEFORE, ANY AGENCY AUTHORIZED TO BRING DISCIPLINARY PROCEEDINGS RELATED TO THE PRACTICE OF ANY PROFESSION?

YES NO

If you answer "yes" to this question, provide details on page 4.

EMPLOYMENT HISTORY

Begin with most recent employer.

Resume Attached?

YES

NO

EMPLOYER
ADDRESS
EMPLOYMENT DATES FROM: / / TO: / /
TITLE AND DUTIES OF YOUR POSITION

EMPLOYER
ADDRESS
EMPLOYMENT DATES FROM: / / TO: / /
TITLE AND DUTIES OF YOUR POSITION

EMPLOYER
ADDRESS
EMPLOYMENT DATES FROM: / / TO: / /
TITLE AND DUTIES OF YOUR POSITION

Answer all questions by placing an X in the appropriate column.

EMPLOYMENT ELIGIBILITY

YES NO

ARE YOU A CITIZEN OF THE UNITED STATES?		
IF "NO," DO YOU HAVE A LEGAL RIGHT TO WORK IN THE UNITED STATES?		

LEGAL HISTORY

If you answer "yes" to any of these questions, provide details on page 4.

YES NO

A) EXCEPT FOR ADJUDICATIONS AS YOUTHFUL OFFENDER, WAYWARD MINOR, OR JUVENILE DELINQUENT, HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR OR FELONY?		
B) DO YOU HAVE ANY CRIMINAL CHARGES PENDING AGAINST YOU?		
C) HAVE YOU EVER BEEN DISMISSED FROM ANY EMPLOYMENT?		
D) HAVE YOU EVER RECEIVED A DISCHARGE FROM THE ARMED FORCES THAT WAS OTHER THAN HONORABLE?		
E) ARE YOU CURRENTLY IN VIOLATION OF A COURT ORDER IN ANY STATE FOR CHILD OR SPOUSAL SUPPORT?		

AFFIRMATION

I affirm that the statements made on this application (including any attached pages) are true.

[False statements made in this application are punishable under Penal Law (§210.45) and may result in your disqualification.]

SIGNATURE OF APPLICANT

DATE

The State of New York Unified Court System is an Equal Opportunity Employer

ADDITIONAL DETAILS

If you answered “yes” to any question that requires additional details, explain here.
Attach additional sheets if necessary.

A large, empty rectangular box with a thin black border, occupying most of the page below the text. It is intended for the user to provide additional details if they answered 'yes' to any question that requires them.