AO 78 (10/09)					
					CH FEDERAL EMPLOYMENT "Remarks" listing item number
Position Title and Vacancy Number					Location Los Angeles 🗖 Santa Ana 🗖 Riverside 🗖
1. NameLast, First, Middle InitialMr. Miss.	Mrs.	Ms.			2. Phone Number Cell 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)
		(GENI	ERA	L
7. Are you a U.S. Citizen?		YES	٦	NO	If no, give the Country of your citizenship
8. a. Were you ever a federal civilian employee?	٦	YES		NO	If yes, give highest civilian grade: / / / / Grade / Step
b. Are you receiving a federal civilian annuity payment?	٦	YES	٦	NO	
c. Are you receiving federal severance pay?	٦	YES		NO	If yes, give former agency contact/telephone:
d. Have you received a federal separation incentive payment in the past 5 years?	٥	YES	٥	NO	If yes, state mo/yr received and former agency contact/telephone:
9. Do you have any relatives who are Judges, Officers or employees of the United States Courts?	٥	YES	٥	NO	If yes, give their names, positions, and relationships to you.
10. Have you ever served on active duty with the military?	٦	YES	٥	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)
B	ACK	GRO	UND	INF	ORMATION
violation of law committed before your 16th birthday, (3) any violati	on of l	aw con	nmitted	befor	nolo contendere (no contest), but omit (1) traffic fines of \$300 or less, (2) any e your 18 th birthday if finally decided in juvenile court or under a Youth Offender and (5) any conviction for which the record was expunged under Federal or state
11. During the last 10 years, have you been convicted, imprisoned, on probation, or on parole? (<i>Include felonies, firearms or</i> <i>explosives violations, misdemeanors, and all other offenses</i>)	٥	YES	٥	NO	If yes, provide in Section 19 the date, explanation of violation, place of occurrence, and name/address of police dept or court.

YES

TYES

🗖 NO

🗖 NO

🗖 NO

12.	Have you been convicted by a military court-martial in the past	
	10 years?	

13. Are you now under charges for any violation of law?

14.	During the last 10 years, have you been fired from any job for	YES
	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?	

15.	Are you delinquent on any Federal debt? (Include delinquencies	YES
	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)).	

□ NO If yes, provide in Section 19 the type, length, and amount of delinquency/default, and steps being taken to correct the error/repay the debt.

If yes, provide in Section 19 the date, explanation of violation, place of occurrence, and name/address of military authority or court.

If yes, provide in Section 19 the date, explanation of violation, place of

If yes, provide in Section 19 the date, explanation of problem, reason for

occurrence, and name/address of police dept or court.

leaving, and employer's name/address.

EDUCATION								
16. a. Do you have a high school diploma or G.E.D. equivalent?	٦	YES 🗖	NO	If yes,	Date of Cor	npletion		
b. Name and location of colleges or universities attended (<i>including law schools</i>)	Da	ates Attended	Q	Credit uarter	Hours Semester	Degree	Date Received	Grade Point Average and/or scholastic standing
16. c. Other schools or training attended (list name/location of school	ol, da	tes attended, si	ubject :	studied,	certificates	received, and o	ther pertinent data):	
JOB RELATED SKII	LLS	, AWARDS	, SPI	ECIAL	ACCON	MPLISHME	ENTS	
 List any skills (e.g., language, computer, keyboarding speed), ho activities, performance awards) that you believe are relevant to 	nors,	awards, or spe	cial ac	complish				societies, leadership
activities, performance awards) that you believe are relevant to	your	ability to perio	i ili ule	J00.				
	- ~ .		~			~		
		NTS FOR						
18. a. Are you admitted to the Bar?	L.	YES 🗖	NO	lf yes, 18b.	list the Bar(s) to which adn	nitted and date(s) of a	dmission. If no, skip to
Is your Bar membership		ACTIVE	٦	INAC	TIVE			
b. What was your scholastic standing in law school?		UPPER 1/2		UPPE	R 1/3	UPPER ¹ / ₄		
c. Were you a member of an editorial board of law review or a moot court participant?		YES 🗖	NO					
19. REMARKS (Use this space for continuation of answers. List the item number being explained.)								

WORK EXPERIENCE

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

Dates of Employment	t (<i>mm/dd/yyyy</i>)	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 Im	mediate Supervisor		Name and Address of Employer (firm, organization, etc.)	
Business Telephone: ((Area Code and Phone Number)			
Business Telephone: ((Area Code and Phone Number)			
Business Telephone: (Reason for Leaving	(Area Code and Phone Number)			
	(Area Code and Phone Number)			
Reason for Leaving	(Area Code and Phone Number)			
Reason for Leaving	(Area Code and Phone Number)			
Reason for Leaving	(Area Code and Phone Number)			
Reason for Leaving	(Area Code and Phone Number)			
Reason for Leaving	(Area Code and Phone Number)			
Reason for Leaving	(Area Code and Phone Number)			

B

Dates of Employmen	t (<i>mm/dd/</i> 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 In	mediate Supervisor		Name and Address of Employer (firm, organization, etc.)
Business Telephone:	(Area Code and Phone Number)		
Reason for Leaving			
D I I CHI I	·		

Description of Work

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e			
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 Imn	nediate Supervisor		Name and Address of Employer (firm, organization, etc.)
Business Telephone: (2	Area Code and Phone Number)		
Reason for Leaving			
Description of Work			

D

Dates of Employment (mm/dd/yyyy)		Number of hours worked per week:	Exact Title of Your Position	
From:	То:			
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 Coa	le and Phone Number)			
Reason for Leaving				
Description of Work				

APPLICANT CERTIFICATION

I certify that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me, or firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated.

UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA

Equal Employment Opportunity Questionnaire

This information is being solicited pursuant to Public Law 93-579, the Privacy Act of	1974, from individuals completing Federal records
and forms requesting personal information.	

Complete this form and submit it with your application. The form will be separated from your application and kept confidential. The information is being gathered to evaluate the effectiveness of the recruitment process. It will be used only for statistical and analytical purposes.

Name of Applicant	Date
Position Title	
How did you learn about this vacancy? (Select one.)	
□ Visit to the Central District of California Court Personnel	Office
Referred by a Central District of California Court Employe	e
□ Professional organization or community group	
(Please specify.)	
□ Newspaper, Internet, professional publication or other pub	lished source
(Please specify.)	
Another Personnel Office (Please specify.)	
Other Means (Please Specify.)	
Gender: Female Male Age Group: Under 21 21-29 30-39	40-49 🗌 50-59 🗌 60 and over 🗌
Disability: No 🗌 Yes 🗌. If yes, explain briefly:	
Race/Ethnicity (Select one only): White African American Hispanic A	sian 🗌 Native American 🗌 Pacific Islander 🗌
What written proof of legal residence can you submit to show y	you are entitled to work in the United States?
Certificate of U.S. Citizenship	U Work Visa
Certificate of Naturalization	Resident Alien Card
Passport	State issued driver's license or U.S. Military card AND Social Security card or certified birth certificate.