

Allen County Court of Common Pleas Probate & Juvenile Divisions

APPLICATION for EMPLOYMENT

Revised: 9/10/2020

BIOGRAPHICAL / RESIDENTIAL INFORMATION

Name (printed):	(First)		Middle)	(Last)
	, ,	,	·	
Former Name(s):	Maiden Name if a	npplicable)		(Junior, II, III, Etc.)
			_ Issuing State: _	
Current Address:				
Current Address.	(Number)	(Street, Road, Etc.)		(Apt. / Unit / Suite)
	(City)	(State)	(Zip)	
Previous Address: (Most Recent)	(Number)	(Street, Road, Etc.)	(Apt. / Unit / Suite)
	(City)	(State)	(Zip)	
CONTACT INFOR	MATION			
eMail Address:				
Home Phone:		M	obile Phone:	
• Note: If no p person.	hone number	is available, please	provide us with th	e name and number of a contact
Contact Name:		Co	ontact Number:	
DESIRED TYPE O	F WORK (Che	eck all that apply)		
[] Full Time	[] Clerl	ks Office	[] Support Servi	ces
[] Part Time	[] Prob	ation	[] Court Security	y
[] Intermittent	[] Inter	vention	[] Maintenance &	& Custodial Services
[] Any Available	[] Deter	ntion Center	[] Specific Position	on:

CONFIDENTIAL

Background Check Authorization for Judicial & Criminal Justice Purposes

Allen County Court of Common Pleas Probate & Juvenile Divisions

Pursuant to Ohio Administrative Code: 5139-37-05(A)(2)(a-c), All applicants seeking direct-care appointment are required to submit, as a pre-condition of employment, to testing for illegal drug use and to a criminal background check by the Ohio Bureau of Criminal Investigation & Identification, which shall include providing fingerprint impressions or digital scans.

Statement of Consent and Understanding Regarding Background Investigation

By affixing my signature below I acknowledge and understand that the Probate & Juvenile Court requires a high degree of integrity and confidentiality of its employees and that the nature of this employment requires that I do not have a history of unlawful activities. I also understand and accept that the nature of my employment is such that various law enforcement entities, public agencies, and service providers must be confident in my ability to maintain confidentiality and I must avoid acts which are unlawful or which might reflect negatively upon the Court or its community partners in both my public and private conduct in order that the public's trust in the judiciary might be steadfastly maintained. I therefore acknowledge and understand that it will be necessary for the Probate & Juvenile Court to conduct a thorough investigation into my background. I agree to provide my date of birth and social security number solely to assist in the completion of my background investigation.

understand that it w	vill be necessa I agree to pro	ary for the Proposite my date	obate & Juvenile Court to conduct a thorough investigation into te of birth and social security number solely to assist in the
Date of Birth:	/	/	S.S.N.: To be collected by Court H.R. Personnel
designated agents consumer report an understand that the areas: verification of background, characterists	or representand/or an investigation of the coordinate of social securities references of federal, states	ntives to contigative report consumer/inverty number; of s; drug testing, county, or of	authorize Allen County Probate and Juvenile Court and its duct a comprehensive review of my background causing a t to be generated for employment and/or volunteer purposes. I estigative report may include, but is not limited to the following current and previous residences; employment history, education g, civil and criminal history records from any criminal justice other municipal jurisdictions; driving records, birth records, and
the United States S information, verbal Court of Common	Social Securit or written, p Pleas or the which the indi-	y Administra pertaining to ir agents. I vidual, compa	firm, corporation, private business, or public agency (including tion and any law enforcement agency) to divulge any and all me, to the Probate & Juvenile Divisions of the Allen County further authorize the complete release of any records or data any, firm, corporation, private business, or public agency may from other sources.
States Social Secu public agencies, or and collectively, fr	rity Administ assigned age om any and a	ration, any in encies, includu Ill liability fo	sions of the Allen County Court of Common Pleas, the United ndividual, company, firm, corporation, private business, other ing officers, employees, or related personnel both individually r damages of whatever kind, which may, at any time, result to compliance with this authorization and request to release.

Applicant Signature:

EQUAL OPPURTUNITY EMPLOYMER & CRIMINAL HISTORY POLICY STATMENT

The Probate & Juvenile Divisions of the Allen County Court of Common Pleas are committed to creating a diverse environment and is proud to be an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, gender, gender identity or expression, sexual orientation, national origin, genetics, disability, age, or veteran status. While an individual's criminal history is not considered as part of the initial application screening process, applicants should be aware that a complete criminal history will be obtained and considered prior to an offer of employment as part of the background/character investigation process.

CURRENT EMPLOYER'S INFORMATION

Address: (Number) (Street, Road, Etc.) (City) (State) (Zip) Phone: Fax:	(Number) (Street, Road, Etc.) (City) (State) (Zip) Phone: Fax: Current Position / Job Title: Salar Current Supervisor's Name:	ry:
(Number) (Street, Road, Etc.) (Apt. / Unit / Suite (City) (State) (Zip) Phone: Fax: Salary:	(Number) (Street, Road, Etc.) (City) (State) (Zip) Phone: Fax: urrent Position / Job Title: Salar urrent Supervisor's Name:	ry:
Phone: Fax:	City) (State) (Zip) Phone: Fax: Irrent Position / Job Title: Salar Irrent Supervisor's Name:	ry:
Phone: Fax:	Phone: Fax: urrent Position / Job Title: Salar urrent Supervisor's Name:	ry:
arrent Position / Job Title: Salary: arrent Supervisor's Name: ate Hired: Can we contact this employer? [] Yes [] No escribe your duties, responsibilities, equipment operated, promotions, accomplishments, etc.	urrent Position / Job Title: Salar urrent Supervisor's Name:	ry:
ate Hired: Can we contact this employer? [] Yes [] No escribe your duties, responsibilities, equipment operated, promotions, accomplishments, etc.	urrent Supervisor's Name:	
te Hired: Can we contact this employer? [] Yes [] No scribe your duties, responsibilities, equipment operated, promotions, accomplishments, etc.		? []Yes []No
te Hired: Can we contact this employer? [] Yes [] No escribe your duties, responsibilities, equipment operated, promotions, accomplishments, etc.		? []Yes []No
escribe your duties, responsibilities, equipment operated, promotions, accomplishments, etc.	tte fifred: Can we contact this employer:	i j res []No
hy do you want to leave the position?		
ny do you want to leave the position?		
	hy do you want to leave the position?	

PREVIOUS EMPLOYMENT HISTORY & WORK EXPERIENCE

Employer:			_
Address:			_
	(Number)	(Street, Road, Etc.)	(Apt. / Unit / Suite)
	(City)	(State) (Zip)	_
Phone:		Supervisor's Name:	
ob Title:		Salary: Start	End
Oates Employed: F	rom	To	
Why did you leave th	he position?		
Employer: Address:	(Number)	(Street, Road, Etc.)	(Apt. / Unit / Suite)
	(City)	(State) (Zip)	-
Phone:		Supervisor's Name:	
ob Title:		Salary: Start	End
		Salary: Start To	

PREVIOUS EMPLOYMENT HISTORY & WORK EXPERIENCE (Continued)

City) (State) (Zip) Phone: Supervisor's Name: Ob Title: Salary: Start End Dates Employed: From To Describe your duties, responsibilities, equipment operated, promotions, accomplishments, of Why did you leave the position? Employer: Address: (Number) (Street, Road, Etc.) (Apt. / Unit / S)				_
City (State (Zip)	Address:			
Supervisor's Name: Salary: Start		(Number)	(Street, Road, Etc.)	(Apt. / Unit / Suite)
Salary: Start End Dates Employed: From To Describe your duties, responsibilities, equipment operated, promotions, accomplishments, of Why did you leave the position? Employer: Address: (Number) (Street, Road, Etc.) (Apt. / Unit / Street, Road, Etc.) (Apt. / Unit / Street, Road, Etc.)		(City)	(State) (Zip)	_
Dates Employed: From To	hone:		Supervisor's Name:	
Employer: Address: (Number) (Street, Road, Etc.) (City) (State) (Zip)	ob Title:		Salary: Start	End
Why did you leave the position? Employer: Address: (Number) (Street, Road, Etc.) (Apt. / Unit / S) (City) (State) (Zip)	Oates Employed: I	rom	To	
Employer: Address: (Number) (Street, Road, Etc.) (City) (State) (Zip)	Vhy did you leave t	the position?		
Employer: Address: (Number) (Street, Road, Etc.) (City) (State) (Zip)	vily ulu you leave t	ne position:		
Address: (Number) (Street, Road, Etc.) (City) (State) (Zip)				
Address: (Number) (Street, Road, Etc.) (Apt. / Unit / S				
(Number) (Street, Road, Etc.) (Apt. / Unit / S (City) (State) (Zip)	Employer:			_
	Address:		(Street, Road, Etc.)	(Apt. / Unit / Suite)
Phone: Supervisor's Name:		(City)	(State) (Zip)	_
Supervisor 5 Numer	Phone:		Supervisor's Name:	
Job Title: Salary: Start End			Salary: Start	End
Dates Employed: From To	ob Title:			
Describe your duties, responsibilities, equipment operated, promotions, accomplishments, e		From	To	

PREVIOUS EMPLOYMENT HISTORY & WORK EXPERIENCE

_	(Number)		
	(Number)		
		(Street, Road, Etc.)	(Apt. / Unit / Suite)
Phone:	(City)	(State) (Zip)	_
		Supervisor's Name:	
ob Title:		Salary: Start	End
Dates Employed: Fro	om	To	
Vhy did you leave the	e position?		
Address: _	(Number)	(Street, Road, Etc.)	(Apt. / Unit / Suite)
((City)	(State) (Zip)	_
		Supervisor's Name:	
		Salary: Start	
Dates Employed: Fro		To	
Describe your duties,			

ACADEMIC INFORMATION

High School Attended:			_
Address:	(Number)	(Street, Road, Etc.)	(Apt. / Unit / Suite)
	(City)	(State) (Zip)	_
Did you graduate? [] Ye	es (Year?) []*No (Obtained G.F	E.D.? [] Yes [] No)
Final Grade Point Averag	e:	Class Rank: out	of
Awards, Activities, Athleti	ics, Clubs, Gro	oups, etc.:	
Address:	(Number)	(Street, Road, Etc.)	(Apt. / Unit / Suite)
	(City)	(State) (Zip)	_
Did you graduate? [] No	[] Yes - Ye	ear? Final Grade Poin	nt Average:
Degree:		Recognitions:	
Major:		Minor:	
Awards, Activities, Athleti	ics, Clubs, Gro	oups, Volunteer Work, etc.:	

ACADEMIC INFORMATION (Continued) Graduate School Attended: **Address:** (Street, Road, Etc.) (Apt. / Unit / Suite) (Number) (City) (State) (Zip) Did you graduate? [] No [] Yes - Year? _____ Final Grade Point Average: _____ Degree: _____ Recognitions: _____ Area of Study: Awards, Activities, Athletics, Clubs, Groups, Volunteer Work, etc.: ADDITIONAL TRAINING, SKILLS, AND EXPERIENCE Please list additional Awards, Activities, Athletics, Clubs, Groups, Volunteer Work, Hobbies, Abilities, Skills, Work Related Information, Memberships, Committee Work, Professional Associations, etc., that you feel would be helpful in the evaluation of your application.:

PERSONAL REFERENCES (Do not include persons related to you by blood or marriage)

Name:				
Address:				
	(Number)	(Street, Road, Etc	2.)	(Apt. / Unit / Suite)
	(City)	(State)	(Zip)	
Phone:	Yea	rs Known:	eMail:	
Are you related to th	nis person eitl	ner by blood or by	marriage? [] Yes	[] No
Name:				
Address:				
	(Number)	(Street, Road, Etc	2.)	(Apt. / Unit / Suite)
	(01-)	(Ctata)	///*\	
	(City)	(State)	(Zip)	
Phone:	Y ea	rs Known:	eMail:	
Are you related to th	nis person eitl	her by blood or by	marriage? [] Yes	[] No
Г				
Name:				
Address:				
	(Number)	(Street, Road, Etc	2.)	(Apt. / Unit / Suite)
	(C) \	(54040)	(77°)	
	(City)		(Zip)	
Phone:	Yea	rs Known:	eMail:	
•	_	her by blood or by	marriage? [] Yes	[] No
Name:				
Address:				
1 14441 555.	(Number)	(Street, Road, Etc	2.)	(Apt. / Unit / Suite)
	(City)	(State)	(Zip)	
Phone:	Yea	rs Known:	eMail:	
			marriage? [] Yes	

PERSONAL INFORMATION

• Do you currently have a valid driver's license? [] Yes [] No O If you answered "No" due to a suspension, do you have work privileges? [] Yes [] No
 Are you a veteran of the United States Armed Services? [] Yes [] No If you answered "Yes," please provide the following additional information: In which branch of armed forces did you serve?
 Your dates of service are from to Was your discharge honorable? [] Yes [] No
• Are you applying for this position subsequent to a "layoff" or "reduction in workforce" from a previous employer? [] Yes [] No
 Are you a U.S. citizen? [] Yes [] No [] No, I am a legal resident alien. If you answered "No," can you verify your ability to work and receive compensation?

Statement of Consent and Understanding Regarding Conditions of Employment

- 1. By affixing my signature below I acknowledge, understand, and accept that an offer of employment with the Probate and Juvenile Divisions of the Allen County Common Pleas Court is conditional upon my passing any medical, psychological, physical, skill-based or aptitude examinations deemed necessary to determine my ability to perform the essential functions of the position offered.
- 2. I further understand that if any information provided by me as part of this application, during the interview process, or during any period of employment is found to be false or misleading my application may be disqualified and, if such is determined to be the case subsequent to my having begun employment, I may be subject to disciplinary action including termination of employment.
- 3. I further understand that the Probate & Juvenile Divisions of the Allen County Common Pleas Court requires a high degree of integrity and confidentiality of its employees and that the nature of this employment requires that I do not have a history of unlawful activities.
- 4. I further understand that the discovery of previous activities or future acts that violate federal, state, or local laws, or the Ohio Supreme Court's code of judicial conduct can result in the termination of employment and may result in criminal prosecution.
- 5. I further understand that any previous or future conduct which violates the rights of children shall be grounds for immediate termination and possible criminal prosecution.
- 6. I further understand that the nature of my employment with the Court may include exposure to hostile persons whether they are juvenile detainees, adult inmates, litigants, distressed family members, or other members of the public under emotional duress.
- 7. I further understand that employment with the Probate & Juvenile Divisions of the Allen County Common Pleas Court will require, upon appointment, for me to swear or affirm an oath to uphold the Constitutions and laws of the United States of America and of the State of Ohio.
- 8. I further state that all information furnished in the employment application and my resumé (if provided) is true, accurate, and complete to the best of my knowledge.
- 9. I hereby authorize the investigation of all statements contained in this application.

Applicant	
Signature:	Date:/