



# Employment Application

## ADMINISTRATIVE OFFICE OF COURTS

RETURN TO:  
Human Resources Division  
Administrative Office of Courts  
300 Dexter Avenue  
Montgomery, AL 36104-3741

**We Are An Equal Opportunity Employer**

1. When completing this application, list the specific job class(es) with the Unified Judicial System in which you are interested. Information on the type of jobs available within the system can be obtained from job announcements which are available in any Alabama State Employment Service Office, the Circuit Clerk's Office in any State Courthouse, the Human Resources Division of the AOC at the above address, and on-line at <http://humanresources.alacourt.gov>.
2. ALL BLANKS MUST BE TYPED OR PRINTED IN INK. PAGES 2 AND 3 MUST BE SIGNED AND DATED.
3. ALL applications must be mailed directly to the Administrative Office of Courts, Human Resources Division, 300 Dexter Avenue, Montgomery, AL 36104-3741, by the applicant. Applications must be received by the Human Resources Division by the close of business on the last date for this job announcement.
4. Your application will be used to determine eligibility for the class(es) for which you are applying. Your application will be accepted or rejected based on the training and experience standards published in the job announcement issued by the Human Resources Division of the Administrative Office of Courts.
5. If the position applied for requires written examination, you will be notified of your score(s) within approximately six weeks after taking the written examination(s). Standing on a register will not be given for those classes which are open for continuous recruitment, because your position may change as names are deleted or new names are added to the register. NOTE: If you are determined to be unqualified for any class, you will be notified by mail.
6. REMOVAL OF ELIGIBLES FROM REGISTER(S): An applicant's name will be removed from the register under any of the following conditions:
  - a. Written evidence that the eligible cannot be located by postal authorities.
  - b. Written evidence that the eligible no longer desires appointment to the class.
  - c. After the eligible has three times failed to reply, or upon being certified for a job vacancy, has declined an offer of employment.
  - d. Written evidence that the applicant falsified his or her application, or is otherwise unsuitable for employment.
7. Failure to give complete information will result in the return and disqualification of your application.
8. It is the responsibility of the applicant to notify the Human Resources Division of the Administrative Office of Courts whenever there is a change of address. The U.S. Postal Service will forward mail for a limited time only.



**PART V. EDUCATION – Give Your Complete Educational History**

**Employment Application**

Did you graduate from high school or pass the high school equivalency test? Check your answer Yes No

LEVEL	NAME & LOCATION	DATES				YEAR of COMPLETION	CRED. HOURS	DID YOU GRAD?	DEGREE OR DIPL. & DATE	MAJOR SUBJECT
		From		To						
		Mo.	Yr.	Mo.	Yr.					
Elementary or High School										
College										
Graduate or Professional										
Other Education, Intern., Etc.										

**PART VI. – CERTIFICATIONS, SKILLS, AND COURSES**

1. List field of work for which you are licensed, registered, or certified. Give date and source of issuance:

2. List typing and shorthand skills, machines you can operate, and other skills in which you are proficient:

3. If the position applied for calls for specific courses, indicate courses and credits received:

**PART VII. – EMPLOYMENT – This section must be completed even if a resume is attached.**

Answer questions for each period of employment; include previous employment with the State of Alabama, military service, and related volunteer work. Failure to give complete information will result in rejection of your application. Begin with your present or last position. If more space is needed, use a continuation sheet (page 3).

**A. Title of present or most recent position** \_\_\_\_\_ **Starting Salary** \_\_\_\_\_ **Last Salary** \_\_\_\_\_

Date employed		
Date separated		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If part-time, no. of hrs. worked /wk.		

Name & Title of supervisor \_\_\_\_\_ # EEs Applicant supv. \_\_\_\_\_  
 Employer \_\_\_\_\_ Address \_\_\_\_\_  
 Duties \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

**B. Title of next most recent position** \_\_\_\_\_ **Starting Salary** \_\_\_\_\_ **Last Salary** \_\_\_\_\_

Date employed		
Date separated		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If part-time, no. of hrs. worked /wk.		

Name & Title of supervisor \_\_\_\_\_ # EEs Applicant supv. \_\_\_\_\_  
 Employer \_\_\_\_\_ Address \_\_\_\_\_  
 Duties \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

**C. Title of next most recent position** \_\_\_\_\_ **Starting Salary** \_\_\_\_\_ **Last Salary** \_\_\_\_\_

Date employed		
Date separated		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If part-time, no. of hrs. worked /wk.		

Name & Title of supervisor \_\_\_\_\_ # EEs Applicant supv. \_\_\_\_\_  
 Employer \_\_\_\_\_ Address \_\_\_\_\_  
 Duties \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

**CERTIFICATION AND CONDITION OF EMPLOYMENT AGREEMENT**

I certify that the statements on or attached to this application are true and correct to the best of my knowledge. I know that any false statements may cause me to be denied employment, the chance for testing, to be removed from an employment register, or to be released from employment. I authorize the release of all prior employment, military service, academic/school and criminal records. If employed, I agree, consistent with applicable laws, to receive compensatory time off in lieu of overtime cash compensation. I also certify (if applicable) that I have enclosed proof of my service registration in compliance with Act 91-584.

Date \_\_\_\_\_ Applicant's Signature : \_\_\_\_\_

# EMPLOYMENT APPLICATION

## Continuation Sheet (page 3)

Date \_\_\_\_\_

D. Title of position \_\_\_\_\_ Ending Salary \_\_\_\_\_  
 Name & title of supervisor \_\_\_\_\_ # EEs Applicant supv. \_\_\_\_\_  
 Name of employer \_\_\_\_\_ Address \_\_\_\_\_

Date employed _____		
Date separated _____		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If part-time, no. of hrs. worked /wk. _____		

Duties \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_  
 \_\_\_\_\_

E. Title of position \_\_\_\_\_ Ending Salary \_\_\_\_\_  
 Name & title of supervisor \_\_\_\_\_ # EEs Applicant supv. \_\_\_\_\_  
 Name of employer \_\_\_\_\_ Address \_\_\_\_\_

Date employed _____		
Date separated _____		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If part-time, no. of hrs. worked /wk. _____		

Duties \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_  
 \_\_\_\_\_

F. Title of position \_\_\_\_\_ Ending Salary \_\_\_\_\_  
 Name & title of supervisor \_\_\_\_\_ # EEs Applicant supv. \_\_\_\_\_  
 Name of employer \_\_\_\_\_ Address \_\_\_\_\_

Date employed _____		
Date separated _____		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If part-time, no. of hrs. worked /wk. _____		

Duties \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_  
 \_\_\_\_\_

G. Title of position \_\_\_\_\_ Ending Salary \_\_\_\_\_  
 Name & title of supervisor \_\_\_\_\_ # EEs Applicant supv. \_\_\_\_\_  
 Name of employer \_\_\_\_\_ Address \_\_\_\_\_

Date employed _____		
Date separated _____		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If part-time, no. of hrs. worked /wk. _____		

Duties \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_  
 \_\_\_\_\_

### CERTIFICATION AND CONDITIONS OF EMPLOYMENT AGREEMENT

I certify that the statements on or attached to this application are true and correct to the best of my knowledge. I know that any false statements may cause me to be denied employment, the chance for testing, to be removed from an employment register, or to be released from employment. I authorize the release of all prior employment, military service, academic/school and criminal records. If employed, I agree, consistent with applicable laws, to receive compensatory time off in lieu of overtime cash compensation. I also certify (if applicable) that I have enclosed proof of my service registration in compliance with Act 91-584.

Date: \_\_\_\_\_  
 \_\_\_\_\_  
 Applicant's Signature

**EQUAL EMPLOYMENT OPPORTUNITY REPORTING AND RESEARCH**

(Federal Employment Opportunity Reporting and Research requires the following Information which is not used to evaluate your application – and is filed separately.)

Month      Day      Year  
Date of Birth

Male      Female      Yes      No  
Sex        U.S. Citizen    
 1. White      4. Black  
 2. Oriental/Asian      5. Hispanic/Latino  
 3. Native American

Social Security #

\*Act 91-584 mandates that persons required to register with the U.S. Selective Service System (i.e., male citizens of the U.S. between the ages of 18 and 26) furnish proof of registration before any offer of employment, promotion, or advancement may be made by the State of Alabama.

A copy of the Selective Service registration must accompany this application.

**COMPLETE THIS SECTION IN ORDER TO BE SCHEDULED FOR WRITTEN EXAMS**

Written examinations will be given periodically in the cities listed below, indicate your 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choices of test dates.

- 01 ( ) Florence
- 02 ( ) Huntsville
- 03 ( ) Gadsden
- 04 ( ) Birmingham
- 05 ( ) Tuscaloosa
- 06 ( ) Montgomery
- 07 ( ) Dothan
- 08 ( ) Mobile

If you qualify, you will receive notification of test date, time, and location.

**IMPORTANT  
PLEASE READ**

Applicants will be notified of their score(s) within approximately six weeks after taking the written examination(s). The standing on the registers for those passing examinations for classes which are open for continuous recruitment (see job announcement) will not be given due to the fact that relative positions will change as new names are added to or deleted from these registers.