



Cleveland Municipal Court

1200 Ontario Avenue ~ Cleveland, Ohio 44113

www.Clevelandmunicipalcourt.org

EMPLOYMENT APPLICATION

It is the policy of Cleveland Municipal Court to provide equal opportunity in employment and advancement to all qualified individuals without regard to race, color, religion, age, sex, national origin, ancestry, disability, genetic information, or sexual orientation. Discrimination is prohibited by federal law, state law, and City Ordinance. To be considered for employment: Complete entire application. Do not indicate "refer to resume". Be sure to sign and date the application.

TODAY'S DATE _____ POSITION APPLIED FOR _____

DATE AVAILABLE _____ ANNUAL SALARY REQUIRED _____

PERSONAL DATA

NAME _____
LAST FIRST MI

ADDRESS _____
NUMBER STREET

CITY STATE ZIP CODE

(____) _____ (____) _____
HOME PHONE CELL PHONE

SOCIAL SECURITY NUMBER _____ - _____ - _____

ARE YOU OVER EIGHTEEN YEARS OF AGE? YES NO

ARE YOU A U.S. CITIZEN OR OTHERWISE ELIGIBLE TO WORK IN THE UNITED STATES?
 YES NO

(BY LAW, ALL PERSONS HIRED ARE REQUIRED TO SHOW PROOF OF IDENTITY AND EMPLOYMENT ELIGIBILITY)

EMERGENCY CONTACT:

NAME _____ HOME/BUSINESS PHONE _____

NUMBER/STREET _____ CITY/STATE _____ ZIP _____

RELATIONSHIP TO YOU: _____

EDUCATION AND TRAINING

	NAME AND ADDRESS	MAJOR	DEGREE EARNED	HIGHEST LEVEL COMPLETED
HIGH SCHOOL				
COLLEGE				
GRADUATE SCHOOL				
BUSINESS/TRADE				
OTHER				

IF YOU DID NOT GRADUATE, DID YOU RECEIVE A G.E.D.? YES NO

USE THIS SPACE FOR AN EXPLANATION OF ADDITIONAL SKILLS, TOOLS, OR SPECIALIZED TRAINING THAT YOU MAY HAVE RECEIVED. (FOR EXAMPLE: OFFICE MACHINES, LICENSES, CERTIFICATIONS, SPECIALIZED SEMINARS, HAND TOOLS, DRILL PRESS, MACHINERY, ETC.)

TYPING YES NO _____ WPM

SHORTHAND YES NO _____ WPM

DICTAPHONE YES NO

PERSONAL COMPUTER YES NO

LIST ANY LANGUAGES THAT YOU SPEAK, READ OR WRITE FLUENTLY:

IF THIS POSITION REQUIRES, CAN YOU PROVIDE A VALID STATE OF OHIO DRIVER'S LICENSE? YES NO

MILITARY SERVICE

(OPTIONAL)

HAVE YOU HAD ANY MILITARY SERVICE IN THE U.S. ARMED FORCES? YES NO

IF YES, BRANCH OF SERVICE _____

DATES OF SERVICE: FROM MO/YEAR _____ MO/YEAR _____

DICHARGE DATE AND RANK: _____ TIME SERVED: _____

EMPLOYMENT HISTORY

PRESENT OR LAST POSITION

COMPANY NAME AND ADDRESS _____ PHONE _____

LENGTH OF EMPLOYMENT: MO/YEAR _____ TO: MO/YEAR _____ SUPERVISOR _____

MAY WE CONTACT YOUR PRESENT EMPLOYER FOR A REFERENCE? YES NO

JOB TITLE _____

JOB DUTIES _____

SALARY STARTED \$ _____ PER _____ CURRENT \$ _____ PER _____

FULL TIME PART TIME REASON FOR LEAVING _____

SECOND LAST POSITION

COMPANY NAME AND ADDRESS _____ PHONE _____

LENGTH OF EMPLOYMENT: MO/YEAR _____ TO: MO/YEAR _____ SUPERVISOR _____

MAY WE CONTACT YOUR PRESENT EMPLOYER FOR A REFERENCE? YES NO

JOB TITLE _____

JOB DUTIES _____

SALARY STARTED \$ _____ PER _____ CURRENT \$ _____ PER _____

FULL TIME PART TIME REASON FOR LEAVING _____

THIRD LAST POSITION

COMPANY NAME AND ADDRESS _____ PHONE _____

LENGTH OF EMPLOYMENT: MO/YEAR _____ TO: MO/YEAR _____ SUPERVISOR _____

MAY WE CONTACT YOUR PRESENT EMPLOYER FOR A REFERENCE? YES NO

JOB TITLE _____

JOB DUTIES _____

SALARY STARTED \$ _____ PER _____ CURRENT \$ _____ PER _____

FULL TIME PART TIME REASON FOR LEAVING _____

GENERAL INFORMATION

HAVE YOU EVER BEEN EMPLOYED BY THE CITY OF CLEVELAND? YES NO

DIVISION YOUR TITLE DATE(S) OF SERVICE

REASON FOR LEAVING CITY EMPLOYMENT _____

HAVE YOU EVER APPLIED HERE BEFORE? YES NO _____

DO YOU HAVE ANY RELATIVES EMPLOYED BY THE CITY OF CLEVELAND? YES NO IF YES, PLEASE LIST
DATE OF APPLICATION
NAME, RELATIONSHIP AND DEPARTMENT _____

DO YOU HAVE ANY RELATIVES EMPLOYED BY THE CLEVELAND MUNICIPAL COURT?
 YES NO IF YES, PLEASE LIST NAME, RELATIONSHIP AND DEPARTMENT _____

LIST OTHER NAMES YOU HAVE BEEN EMPLOYED UNDER _____

ARE YOU WILLING TO WORK OVERTIME? YES NO

ARE YOU WILLING TO WORK SHIFTS? YES NO

REFERENCES

PLEASE LIST NAMES AND ADDRESS OF THREE PERSONS WE MAY CONTACT FOR A PROFESSIONAL RECOMMENDATION. (DO NOT LIST FORMER EMPLOYERS OR RELATIVES)

NAME	ADDRESS	CITY/STATE/ZIP	PHONE
			()
			()
			()

APPLICATION WILL NOT BE ACCEPTED IF THIS AFFIRMATION IS OMITTED

I HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND UNDERSTAND THAT FALSIFICATION OF THIS APPLICATION WILL RESULT IN DISMISSAL. I hereby also consent to the release of all my police records concerning any arrest with subsequent convictions for crimes. I release these records to the Cleveland Municipal Court, and waive any right to personal privacy I might have over the records.

SIGNATURE

DATE

AUTHORIZATION TO PERFORM BACKGROUND CHECK

Please read the following before signing:

AUTHORIZATION TO DO BACKGROUND CHECK FOR RELEASE OF CONFIDENTIAL INFORMATION AND WAIVER OF PRIVACY RIGHTS:

I, _____, hereby authorize the Cleveland Municipal Court and its agents or employees to conduct a background check on me and authorize the release of pertinent information concerning me from any source, including, but not limited to, past employers.

The undersigned applicant, in granting this application hereby specifically WAIVES any right to PERSONAL PRIVACY he or she might have in the above information and RELEASES the Cleveland Municipal Court and any person or agency from ANY LIABILITY WHATSOEVER resulting from the release of such information.

NOTE: Public Law 91-508 requires that we advise you that a routine inquiry may be made which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. ROUTINE INQUIRIES MAY INCLUDE PERSONAL INTERVIEWS WITH FRIENDS, NEIGHBORS, REFERENCES AND PAST EMPLOYERS. Upon written request, additional information as to the nature and scope of a resulting report, if one is made, will be provided.

My signature below certifies that my responses on the Application for Employment are true and complete to the best of my knowledge. I understand that employment is based on completion of all pre-employment requirements and procedures which may include:

1. Interviews
2. Urine drug screen and pre-employment physical
3. Proof of identify and employment eligibility for work in the U.S.
4. Education and reference checking
5. Testing (if applicable to the position for which you are applying)
6. Criminal and motor vehicle record check

In addition, I understand that any offer of employment will be contingent upon the results of a physical examination by authorized medical personnel of or for the Cleveland Municipal Court.

Compliance with the Cleveland Municipal Court’s Drug Testing Policy is a condition of employment. Therefore, all job offers are made with the understanding that prospective employees pass a drug screening test prior to being hired.

I understand and agree that any falsification or omission, either on this form or in response to questions asked during my interview or examination process or on employment forms I subsequently complete, including 1-9, shall be grounds for immediate termination, no matter when the falsification or omission is discovered.

SIGNATURE

DATE