

SANTA BARBARA COUNTY SUPERIOR COURT  
EMPLOYMENT APPLICATION

An Equal Opportunity Employer

Human Resources, 118 E. Figueroa St., Santa Barbara, CA 93101  
805-882-4739 Hours: 8am – 5pm M-F <http://www.sbcourts.org/gi/hr>

**INSTRUCTIONS FOR COMPLETING THIS APPLICATION:** This form is part of the selection process. Before completing this application, read the Job Bulletin to ensure you submit all of the information necessary to evaluate your application. Type or use dark ink and complete all four pages of this application. Do not submit a resume in place of completing any part of this application. Please use a separate application for each job for which you apply. Applications and attachments will not be returned or photocopied for you. Notify Human Resources if you change your address, phone number, or name. Call Human Resources if you have any questions concerning this application or the selection process.

Job Title \_\_\_\_\_ Job Bulletin Number \_\_\_\_\_

Applicant Name \_\_\_\_\_  
Last First Middle

Mailing Address \_\_\_\_\_  
Number and Street City and State Zip

Email Address \_\_\_\_\_

Home Phone Number (\_\_\_\_\_) \_\_\_\_\_ Ok to leave message?  Yes  No

Cell Phone Number (\_\_\_\_\_) \_\_\_\_\_ Ok to leave message?  Yes  No

Work Phone Number (\_\_\_\_\_) \_\_\_\_\_ Ok to leave message?  Yes  No

Indicate where you will initially accept employment and the type of appointment(s) you will accept: (Important: Employment with the Court may require transfer to other than stated location. In accepting employment with the Court, you are consenting to such transfer.)

- All Locations       Santa Barbara       Santa Maria  
 Lompoc       Solvang       Other \_\_\_\_\_

- Full-time regular position (40 hours per week)       Part-time regular position (fewer than 40 hours per week)  
 Extra-help (temporary)

**Answer the following questions for all jobs:**

Yes     No    Are you currently employed by the Santa Barbara Superior Court? If yes, indicate type of employment:  
 Regular       Extra-help       Contract

Yes     No    Can you, after employment, submit proof of your legal right to work in the United States?

Yes     No    Are you 18 years of age or over ?

Yes     No    Are you related to anyone who works for Santa Barbara Superior Court by blood, marriage or adoption?  
If yes, list:

Name(s) \_\_\_\_\_

Relationship(s) \_\_\_\_\_

Department(s) \_\_\_\_\_

Language(s) other than English     Spanish       Speak      or       Speak/Read/Write Fluently  
 \_\_\_\_\_       Speak      or       Speak/Read/Write Fluently

<input type="checkbox"/> Yes <input type="checkbox"/> No	Did you graduate from high school? If no, do you possess a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input type="checkbox"/> N/A	Supplemental Questionnaire: Is your supplemental questionnaire attached?

Professional Licenses, Certifications, or Registrations	Type:	Number:	Issuing Agency:	Date Issued:	Date Expires:
Software programs, applications and proficiency	Application/Program Name/Level of Proficiency:		Application/Program Name/Level of Proficiency:		
	Example: Microsoft Word/ Intermediate				
Driver's License	Check Class: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C License No. _____ State Issued by: _____				

College, Graduate, Professional, Business, and/or Trade School(s) Attended:

Name of School	City & State	Major Subject	# of Units	Check One Sem   Qtr	Type of Degree	Degree Awarded?
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No

**Employment Experience**

List all paid positions and any related volunteer experience, starting with your most recent job. List different jobs/positions with same employer separately. If you need additional space, attach a photocopy of page 3 or additional sheets of paper and include answers to all of the questions asked on this application about each job experience. Refer to the **Employment Standards** on the **Job Bulletin** for this recruitment to help you decide whether a job you have held fulfills all or part of the employment standards. A resume will not be accepted in place of this section. Indicate reasons for lapses in employment greater than 6 months.

Dates of employment: From   /   /   to   /   /   Hrs/Wk _____ Length of employment _____ yrs. _____ mos.	
Official job title	
Description of primary duties	
Name of employer	Type of business
Mailing Address	Supervisor's name
	Supervisor's job title
# employees you supervised	Reason for leaving
Name, if employed under another name:	Are we authorized to contact this employer regarding your employment record & performance? <input type="checkbox"/> Yes <input type="checkbox"/> No Supervisor's phone number ( _____ ) _____

Dates of employment: From    /    /    to    /    /    Hrs/Wk _____ Length of employment _____ yrs. _____ mos.	
Official job title	
Description of primary duties	
Name of employer	Type of business
Mailing address	Supervisor's name
	Supervisor's job title
P o. of employees you supervised<    .....	Reason for leaving<
Name, if employed under another name	Are we authorized to contact this employer regarding your employment record & performance? <input type="checkbox"/> Yes <input type="checkbox"/> No Supervisor's phone number ( _____ ) _____

Dates of employment: From    /    /    to    /    /    Hrs/Wk _____ Length of employment _____ yrs. _____ mos.	
Official job title	
Description of primary duties	
Name of employer	Type of business
Mailing address	Supervisor's name
	Supervisor's job title
No. of employees you supervised<    .....	Reason for leaving<
Name, if employed under another name	Are we authorized to contact this employer regarding your employment record & performance? <input type="checkbox"/> Yes <input type="checkbox"/> No Supervisor's phone number ( _____ ) _____

Dates of employment:									
From	/	/	to	/	/	Hrs/Wk	Length of employment	yrs.	mos.
Official job title									
Description of primary duties									
Name of employer					Type of business				
Mailing address					Supervisor's name				
					Supervisor's job title				
No. of employees you supervised <				Reason for leaving <					
Name, if employed under another name					Are we authorized to contact this employer regarding your employment record & performance? Yes No				
					Supervisor's phone number ( )				

**EQUIVALENT TRAINING, EDUCATION, AND EXPERIENCE**

If you do not meet the education or experience requirements, you may still qualify for this position. The Employment Standards on the Job Bulletin may indicate that an equivalent combination of training, education, and experience provide the required Knowledge and Abilities for the position. If the Job Bulletin contains this provision and if you possess the required knowledge and abilities, please describe how you obtained the knowledge and abilities by completing this section in addition to completing the Employment Experience section above. Attach additional sheets of paper if more space is needed. The combination of your training, education, and experience should be equivalent to the other options listed under Employment Standards.

Description of equivalent training, education, and experience:

**APPLICANT RELEASE OF EMPLOYMENT INFORMATION**

**Please read before signing:** I declare under penalty of perjury that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief. I understand statements made are subject to verification and that any misrepresentation, fraud, or omission of material facts may be grounds to deny Court employment, or for disciplinary action including dismissal after employment. I understand that a background check will be completed prior to any offer of employment with the Santa Barbara County Superior Court. I understand that this includes a review of any criminal record that I may have. I also understand that convictions are evaluated for each position and are not necessarily disqualifying.

Unless otherwise indicated on this application, I hereby authorize designated representatives of my current and former employers to respond to verbal or written inquiries and to release information about my employment with their respective organizations, including information based on the materials in my personnel file, to authorized representatives of the Santa Barbara Superior Court.

I do hereby agree to release, save, defend, and hold harmless my current and former employers and/or their officers, employees, and agents from any claims arising from the release of such employment information.

Print name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please help us comply with State and Federal laws by completing this section. While you are not required to complete this section, you should know that if you leave it blank, we have the right to enter data for this purpose based upon our visual assessment. On a periodic basis we must report statistical information about applicants and employees to the California and United States governments to demonstrate that we meet equal employment opportunity requirements. This information will be kept separate and confidential and will not be used in any unlawful way to make any employment decision.

Name \_\_\_\_\_

Job Bulletin # \_\_\_\_\_

Job Title \_\_\_\_\_

Your Date of Birth \_\_\_\_\_ / \_\_\_\_\_  
Month Year

Male

Female

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**To help us carry out our EEO obligations, please indicate whether any of the following definitions applies to you.**

**VIETNAM ERA VETERAN:** A person who 1) served on active duty for a period of more than 180 days, any part of which occurred between 8/5/64 and 5/7/75, and was discharged or released there from with other than a dishonorable discharge, or 2) was discharged or released from active duty for service-connected disability, if any part of such active duty was performed between the above dates.

**DISABLED VETERAN:** A person entitled to disability compensation under laws administered by the Veteran's Administration for disability rated at 30 percent or more, or a person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty.

**INDIVIDUAL WITH A DISABILITY:** A person who 1) has a physical or mental impairment which limits one or more of such person's major life activities 2) has a record of such impairment or 3) is regarded as having such impairment.

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**Please answer below based upon how you identify yourself. We understand that it may be difficult to choose a single ethnic identity if you have a multicultural heritage. Nevertheless, to comply with legal guidelines, we would like you to choose only one.**

**WHITE:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**BLACK or AFRICAN AMERICAN:** A person having origins in any of the black racial groups of Africa.

**HISPANIC or LATINO:** A person having origins in Cuba, Mexico, Puerto Rico, South or Central America, or other Spanish culture.

**NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.

**ASIAN:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

**AMERICAN INDIAN or ALASKAN NATIVE:** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

**TWO OR MORE RACES:** All persons who identify with more than one of the above six races.

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**I first learned of this job opening through (check only one):**

Court website, bulletin or contact with the HR Department

Internet posting:  
\_\_\_\_\_

Court employee, friend or relative:  
\_\_\_\_\_

Contact with a Court department other than Human Resources

Trade or professional publication:  
\_\_\_\_\_

Organization or group:  
\_\_\_\_\_

School placement office

Television/radio/movies

Walk In

Newspaper:

Santa Barbara News Press

Santa Maria Times

Lompoc Record

Santa Barbara Independent

Daily Sound

Other: \_\_\_\_\_