

# MONTGOMERY COUNTY COMMON PLEAS COURT

## JUVENILE COURT



Court Administration  
380 W. Second St.  
Dayton, OH 45422  
Phone - 496-7707, FAX- 496-6857

### APPLICATION FOR EMPLOYMENT

*Print Clearly. Use blue or black ink. Press firmly and answer all questions.*

1. Name: \_\_\_\_\_  
Last First Middle
2. Address: \_\_\_\_\_  
Street City County State Zip
3. Telephone Number: Home: \_\_\_\_\_ Alternate \_\_\_\_\_
4. Position (s) applying for: (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_
5. When would you be available if offered a position? \_\_\_\_\_
6. Are you applying for: Regular, full-time employment \_\_\_\_\_ Part-time employment \_\_\_\_\_  
Temporary employment \_\_\_\_\_ Seasonal employment \_\_\_\_\_ Intermittent employment \_\_\_\_\_
7. Have you worked for Montgomery County, the State of Ohio, or any political subdivision before?  
Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when? \_\_\_\_\_ Which department? \_\_\_\_\_
8. Do you have any relatives currently employed by Montgomery County? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, what department? \_\_\_\_\_
9. Are you 18 or over? Yes \_\_\_\_\_ No \_\_\_\_\_
10. Whom shall we contact in case of an emergency? Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone #: \_\_\_\_\_
11. Are you capable of performing the material & substantial duties of the position(s) that you are applying for with or without reasonable accommodation? Yes \_\_\_\_\_ No \_\_\_\_\_
12. Do you meet the minimum qualifications for the position(s) for which you are applying? \_\_\_\_\_

### 13. EMPLOYMENT HISTORY

Account for ALL TIMES for the past TEN years, including periods of unemployment. INDICATE NAME USED IF OTHER THAN SIGNATURE ON THIS APPLICATION. Begin with PRESENT position or occupation. In addition, list any other RELEVANT experience PRIOR to the last 10 years. (If you need more room, use a separate sheet of paper.) A resume is both welcomed and urged in addition to completion of this application. It will become an official part of the application, but may not be substituted for any part of this application.

- A. Employer Name: \_\_\_\_\_ Salary: \_\_\_\_\_ Per: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Street City State Zip Code  
Supervisor's Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
Your Title: \_\_\_\_\_ Dates employed (mo/yr): From: \_\_\_\_\_ To: \_\_\_\_\_  
Your Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact? Yes \_\_\_\_\_ No \_\_\_\_\_

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B. Employer Name: \_\_\_\_\_ Salary: \_\_\_\_\_ Per: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Street City State Zip Code

Supervisor's Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Your Title: \_\_\_\_\_ Dates employed (mo/yr): From: \_\_\_\_\_ To: \_\_\_\_\_

Your Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact? Yes \_\_\_\_\_ No \_\_\_\_\_

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C. Employer Name: \_\_\_\_\_ Salary: \_\_\_\_\_ Per: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Street City State Zip Code

Supervisor's Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Your Title: \_\_\_\_\_ Dates employed (mo/yr): From: \_\_\_\_\_ To: \_\_\_\_\_

Your Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact? Yes \_\_\_\_\_ No \_\_\_\_\_

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14. **MILITARY SERVICE INFORMATION**

Branch of Service: \_\_\_\_\_

Highest Rank Achieved: \_\_\_\_\_

Job Title: \_\_\_\_\_ Duties: \_\_\_\_\_

Total Length of Service Time: \_\_\_\_\_ Reserve or National Guard Status: \_\_\_\_\_

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15. **COMPUTER SKILLS:**

Proficiency Level: Basic \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced \_\_\_\_\_ WPM Typed \_\_\_\_\_

Word Processing Software: \_\_\_\_\_

Other PC Applications: \_\_\_\_\_

16. **LICENSURE and CERTIFICATIONS:** List any professional licensure(s) or certification(s).

Type: \_\_\_\_\_ State: \_\_\_\_\_ Number: \_\_\_\_\_

Type: \_\_\_\_\_ State: \_\_\_\_\_ Number: \_\_\_\_\_

17. Do you have a valid driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_ State \_\_\_\_\_

18. Social Security Number: \_\_\_\_\_

19. **EDUCATION**

High School Attended \_\_\_\_\_ Grade Completed: 7 8 9 10 11 12

City/State \_\_\_\_\_ Graduated or GED? \_\_\_\_\_

Are you currently enrolled in school \_\_\_\_\_ Part-time \_\_\_\_\_ Full-time \_\_\_\_\_

Name of Institution

	Years Attended	Number of Years completed	Did You Graduate?	Course of Study	Give types of degree, credits earned, or other documents awarded.
College _____ (undergraduate) _____ City State					
College _____ (graduate) _____ City State					
College _____ (Other) _____ City State					

20. **REFERENCES:** Use professional references only, do not use relatives.

1. Name & Title: \_\_\_\_\_

2. Name & Title: \_\_\_\_\_

Business or Home Address: \_\_\_\_\_

Business or Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

3. Name & Title: \_\_\_\_\_

4. Name & Title: \_\_\_\_\_

Business or Home Address: \_\_\_\_\_

Business or Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

21. Please explain any additional knowledge, skills, or abilities which may be of a qualifying nature or helpful in establishing your eligibility. Include projects, hobbies, community or volunteer activities, etc.

\_\_\_\_\_

\_\_\_\_\_

## 22. DISCLOSURES

### A. CONVICTION DISCLOSURE

All applicants please be advised that if the position for which you are applying will bring you into contact with any juvenile detainees, pursuant to 29 C.F.R. §115.317 you are not eligible for employment if you: (1) have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; (2) have been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) have been civilly or administratively adjudicated for engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse.

### B. PRISON RAPE ELIMINATION ACT DISCLOSURE

As an applicant for a position with the Montgomery County Juvenile Court, that may involve contact with a juvenile detainee as part any employment, I assert the following:

I have not engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution;

I have not been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; and

I have not been civilly or administratively adjudicated to have engaged or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse.

I further acknowledge that should I be accepted for employment with Montgomery County Juvenile Court that I have a continuing affirmative duty to disclose any misconduct as listed above.

I certify that by signing this statement that these statements are true and accurate to the best of my knowledge. I understand a false answer or material omission may be grounds for dismissal from employment with Montgomery County.

I hereby release you, your organization or others from liability or damages, which may result from the exchange of the information requested. I also certify that all statements contained herein or at any step of the employment process are true, complete and correct to the best of my knowledge. I understand that a false answer or material omissions may be grounds for dismissal from employment with Montgomery County.

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23. **PLEASE NOTE:** Montgomery County hires only documented United State citizens authorized to work in the United States. Verification of identity and work authorization will be required if hired as a condition of employment. All positions, because of the nature of the work, require pre-employment drug/alcohol screening tests and/or periodic physical examination.

### **ATTENTION: READ THE FOLLOWING STATEMENTS BEFORE SIGNING THIS DOCUMENT**

As an applicant for employment with the Common Pleas Court of Montgomery County, Juvenile Division, I understand and agree that the County may make a thorough investigation of my past employment and activities. (This may include, but not be limited to, a motor vehicle operator and police record investigations.) I hereby release you, your organization or others from any liability or damages, which may result from the exchange of the information requested. I also certify that all statements contained herein or at any step of the employment process are true, complete and correct to the best of my knowledge. I understand a false answer or material omissions may be grounds for dismissal from employment with Montgomery County.

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Signature

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Date