



Riverside County Law Library JOB APPLICATION

APPLICANT		
Name	Cell Phone	Home Phone
Address	Email Address	
Best method to contact you? Mail [<input type="checkbox"/>] Email [<input type="checkbox"/>] Cell Phone [<input type="checkbox"/>] Home Phone [<input type="checkbox"/>]		

POSITION SOUGHT					
In Riverside? [<input type="checkbox"/>] In Indio? [<input type="checkbox"/>] Either location [<input type="checkbox"/>]					
Part-time?	Y [<input type="checkbox"/>] N [<input type="checkbox"/>]	Full-time?	Y [<input type="checkbox"/>] N [<input type="checkbox"/>]	On-Call	Y [<input type="checkbox"/>] N [<input type="checkbox"/>]
Work weekends?	Y [<input type="checkbox"/>] N [<input type="checkbox"/>]	Work evenings?	Y [<input type="checkbox"/>] N [<input type="checkbox"/>]		

EDUCATION			
Did you graduate from high school?	Y [<input type="checkbox"/>] N [<input type="checkbox"/>]	If no, GED?	Y [<input type="checkbox"/>] N [<input type="checkbox"/>]
Colleges / Technical Schools / Graduate Schools			
Name	Location	Dates Attended	Degree Received

WORK HISTORY

Beginning with your current or most recent job, list all employment, paid and volunteer, in the past 5 years, and any prior experience which relates to the job for which you are applying.

Employer's Name & Address:

	Dates Employed	
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Supervisor's Name:

	Hours per Week	
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Job Title / Primary Duties:

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Reason for Leaving:

May we contact this employer? Y [] N []

Employer's Name & Address:

	Dates Employed	
--	----------------	--

Supervisor's Name:

	Hours per Week	
--	----------------	--

Job Title / Primary Duties:

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Reason for Leaving:

May we contact this employer? Y [] N []

Employer's Name & Address:

	Dates Employed	
--	----------------	--

Supervisor's Name:

	Hours per Week	
--	----------------	--

Job Title / Primary Duties:

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Reason for Leaving:

May we contact this employer? Y [] N []

The information that I have provided on this application is accurate and true to the best of my knowledge. I understand that any misrepresentations or omissions of fact may result in the refusal of employment or if employed, termination. If hired, I will be able to certify that I am authorized to work in the United States and am able to show proof of eligibility.

Signed:

Date: