

PLEASE COMPLETE THIS SECTION FIRST

Name\*: \_\_\_\_\_  
LAST FIRST MIDDLE

Address\*: \_\_\_\_\_  
MAILING ADDRESS HOME PHONE\*

\_\_\_\_\_  
CITY STATE ZIP CODE ALTERNATIVE PHONE

Email: \_\_\_\_\_

\_\_\_\_\_  
POSITION FOR WHICH YOU ARE APPLYING

\_\_\_\_\_  
POSITION NUMBER  
\* YOU WILL NOT BE CONSIDERED  
WITHOUT A POSITION NUMBER

\_\_\_\_\_  
COURT NAME  
\* Required



# NEW HAMPSHIRE Judicial Branch



The State of New Hampshire is an equal opportunity employer

Discrimination on the basis of age, sex, race, color, marital status, physical or mental disability, religious creed, national origin, sexual orientation or any other non-merit factor is strictly prohibited.

ONLINE APPLICATION FOR EMPLOYMENT

FOR OFFICIAL USE ONLY:

Internal Hire

Be sure you have filled in the identifying information at the top of this application.

Do not write in the space marked "For Official Use Only"

Will you accept those which apply (check):  full-time  part-time  temporary

Please check **up to** three counties in which you will accept employment: - Check none if you will accept employment statewide.

Merrimack  Belknap  Hillsborough  Rockingham  Cheshire  Coos  Strafford  Sullivan  Grafton  Carroll

If the position requires a license or special certification, please complete the following:

Type of License or Certificate \_\_\_\_\_ License/Certificate # \_\_\_\_\_ Expiration Date \_\_\_\_\_

**DO YOU HAVE THE LEGAL RIGHT TO ACCEPT EMPLOYMENT IN THE UNITED STATES?**  Yes  No

Are you at least 18 years of age?  Yes  No Are you able to travel, if so required?  Yes  No

Have you been employed by the Court/State before?  Yes  No If yes, when \_\_\_\_\_

For what Court/Agency/Department were you employed? \_\_\_\_\_ In what position? \_\_\_\_\_

Perm.  Temp.  Full-time  Part-time What was your reason for leaving? \_\_\_\_\_

**EDUCATION**

Please enter the highest school grade completed: \_\_\_\_ (8 – 9 – 10 – 11 – 12 or GED – 13 – 14 – 15 – 16 – 17 – 18)

Are there any specialized courses you have taken which should be considered with this application? Please explain below.

College, Business, Trade School, Other Education: **TRANSCRIPTS MUST BE SUBMITTED** IF POSITION REQUIRES POSTSECONDARY EDUCATION

**(Photocopies accepted for certification purposes)**

<b>Name of School</b>	<b>Major</b>	<b>Minor</b>	<b>Degree or Certificate Earned</b>	<b>Year</b>

**EXPERIENCE – WORK HISTORY**

Please start with most recent or current employer and work back at least ten years. Resumes may be submitted, but not in lieu of completing this section. If more space is needed, please complete and attach a separate page. Incomplete employment history and/or statements such as “refer to resume” or failure to complete all required fields will be cause for disqualification\*.

**Employer\*:** \_\_\_\_\_ **Address:** \_\_\_\_\_ **Phone\*:** ( ) \_\_\_\_\_

**Your Job Title\*:** \_\_\_\_\_ **Supervisor (Name/Title)\*:** \_\_\_\_\_

**Date of Employment\*:** Mo. \_\_\_\_\_ Year \_\_\_\_\_ to Mo. \_\_\_\_\_ Year \_\_\_\_\_ **Hours worked per week** \_\_\_\_\_ **May we contact?**  Yes  No

**Duties:** Please describe your responsibilities\*:

**How many employees did you supervise?** \_\_\_\_\_ **Did you assign their work?**  Yes  No **Reject unsatisfactory work?**  Yes  No

**Did you have the authority to hire/fire?**  Yes  No **Reason you left this position:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Address:** \_\_\_\_\_ **Phone:** ( ) \_\_\_\_\_

**Your Job Title:** \_\_\_\_\_ **Supervisor (Name/Title):** \_\_\_\_\_

**Date of Employment:** Mo. \_\_\_\_\_ Year \_\_\_\_\_ to Mo. \_\_\_\_\_ Year \_\_\_\_\_ **Hours worked per week** \_\_\_\_\_ **May we contact?**  Yes  No

**Duties:** Please describe your position responsibilities:

**How many employees did you supervise?** \_\_\_\_\_ **Did you assign their work?**  Yes  No **Reject unsatisfactory work?**  Yes  No

**Did you have the authority to hire/fire?**  Yes  No **Reason you left this position:** \_\_\_\_\_

**NEW HAMPSHIRE JUDICIAL BRANCH ONLINE EMPLOYMENT APPLICATION**

**Employer:** \_\_\_\_\_ Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Your Job Title: \_\_\_\_\_ Supervisor (Name/Title): \_\_\_\_\_

Date of Employment: Mo. \_\_\_\_\_ Year \_\_\_\_\_ to Mo. \_\_\_\_\_ Year \_\_\_\_\_ Hours worked per week \_\_\_\_\_ May we contact?  Yes  No

Duties: Please describe your position responsibilities:  
\_\_\_\_\_  
\_\_\_\_\_

How many employees did you supervise? \_\_\_\_\_ Did you assign their work?  Yes  No Reject unsatisfactory work?  Yes  No

Did you have the authority to hire/fire?  Yes  No Reason you left this position: \_\_\_\_\_

**Employer:** \_\_\_\_\_ Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Your Job Title: \_\_\_\_\_ Supervisor (Name/Title): \_\_\_\_\_

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Duties: Please describe your position responsibilities:  
\_\_\_\_\_  
\_\_\_\_\_

How many employees did you supervise? \_\_\_\_\_ Did you assign their work?  Yes  No Reject unsatisfactory work?  Yes  No

Did you have the authority to hire/fire?  Yes  No Reason you left this position: \_\_\_\_\_

I have attached a copy of my current resume.

**I understand that in order for my application to be considered, the following Affirmation MUST BE COMPLETED.**

I certify the information provided in or attached to this application is complete, accurate and up-to-date on the date specified below. I certify that if I should be offered and subsequently accept employment, that my employment will be contingent upon the successful completion of a criminal records check. I certify that I have the legal right to accept employment in this state, and that I will produce, at or before the date of hire, proof of that right to accept employment. I further certify that there are no willful misrepresentations of the above statement and the answer to the question herein, and that I have made no omissions of material fact with respect to any of my answers to the questions presented. I understand that if an investigation should disclose such misrepresentation or omissions, my application may be rejected. Finally, I understand that if I should be employed at the time of such investigation and disclosure, my service may be immediately terminated. I understand that I may be required to sign a facsimile of this form before I may begin employment in this or any other position.

**By checking this box, you are certifying that you have read and agreed to the above statement**

SIGNATURE: /s/ \_\_\_\_\_ DATE: \_\_\_\_\_

(Each application must bear a **current date** and **original or electronic signature**.)

<p>UNLESS OTHERWISE SPECIFIED, APPLICATION SHOULD BE RETURNED TO:</p> <p>NEW HAMPSHIRE JUDICIAL BRANCH ADMINISTRATIVE OFFICES ATTENTION: HUMAN RESOURCES 1 GRANITE PLACE, SUITE N400 CONCORD, NEW HAMPSHIRE 03301</p> <p>Telephone: (603) 271-2521 Fax number: (603) 513-5454 Email: applications@courts.state.nh.us</p>	<p><b>RECRUITMENT/EMPLOYMENT SURVEY</b></p> <p>Please check one of the following to assist in our recruitment efforts. I learned of this career opportunity through:</p> <table border="0"> <tr> <td><input type="checkbox"/> Indeed.com</td> <td><input type="checkbox"/> In-house posting within my agency</td> </tr> <tr> <td><input type="checkbox"/> Opportunities in NH State</td> <td><input type="checkbox"/> Job Fair</td> </tr> <tr> <td><input type="checkbox"/> Craig's List</td> <td><input type="checkbox"/> Judicial Branch website</td> </tr> <tr> <td><input type="checkbox"/> JobsInNH.com</td> <td><input type="checkbox"/> Newspaper (please name): _____</td> </tr> <tr> <td><input type="checkbox"/> Other (please specify) _____</td> <td></td> </tr> </table>	<input type="checkbox"/> Indeed.com	<input type="checkbox"/> In-house posting within my agency	<input type="checkbox"/> Opportunities in NH State	<input type="checkbox"/> Job Fair	<input type="checkbox"/> Craig's List	<input type="checkbox"/> Judicial Branch website	<input type="checkbox"/> JobsInNH.com	<input type="checkbox"/> Newspaper (please name): _____	<input type="checkbox"/> Other (please specify) _____	
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**State of New Hampshire - Administrative Office of the Courts  
Equal Employment Opportunity Survey**

As part of its mandate under Title VII of the Civil Rights Act of 1964, the federal Equal Employment Opportunity Commission requires periodic reports from state governments which indicate the composition of their applicant and work force by age, gender and ethnic/race category based on specific job categories (professional, technical, administrative, management etc.). Your responses are **Strictly Voluntary**, will be kept **Confidential** and separated from all other personnel records only accessed by the Human Resources Department. **No adverse treatment will result if you choose not to answer any of the questions.**

**GENDER:** (Please check only **one** response below)

- Male     Female

**ETHNICITY:** (Please check only **one** response below)

**H = Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race

- YES     NO

**RACE:** (Please check only **one** response below)

- W = White (Not Hispanic or Latino)** - A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
- B = Black or African American (Not Hispanic or Latino)** - A person having origins in any of the black racial groups of Africa.
- NHOPI = Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** - A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.
- A = Asian (Not Hispanic or Latino)** - A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- AIAN = American Indian or Alaska Native (Not Hispanic or Latino)** - A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment.
- T = Two or More Races (Not Hispanic or Latino)** - All persons who identify with more than one of the above five races.  
**Please check all that apply:**     **W**     **B**     **NHOPI**     **A**     **AIAN**

**VETERAN STATUS:** (Please check **one** of the descriptions below corresponding to the disability/veteran group with which you identify.)

- Disabled Veteran** - Any veteran who served on active duty in the U.S. military, ground, naval or air service during the one-year period beginning on the date of such veteran's discharge or release from active duty.
- Armed Forces Service Medal Veteran** - Any veteran who served on active duty in the U.S. military, ground, naval or air service during the one-year period beginning on the date of such veteran's discharge or release from active duty.
- Other Protected Veteran** - Any veteran who served on active duty in the U.S. military, ground, naval or air service during the one-year period beginning on the date of such veteran's discharge or release from active duty.
- Recently Separated Veteran** - Any veteran who served on active duty in the U.S. military, ground, naval or air service during the one-year period beginning on the date of such veteran's discharge or release from active duty. Date of Discharge: \_\_\_\_\_
- Not a Veteran**

Date completed: \_\_\_\_\_

Thank you for your participation.

**PLEASE RETURN COMPLETED FORM TO:  
NEW HAMPSHIRE JUDICIAL BRANCH ADMINISTRATIVE OFFICES  
ATTENTION: HUMAN RESOURCES  
1 GRANITE PLACE, SUITE N400  
CONCORD, NEW HAMPSHIRE 03301**