



JUDICIARY OF THE U.S. VIRGIN ISLANDS

APPLICATION FOR EMPLOYMENT

Employment is contingent upon the applicant providing the necessary proof of citizenship or legal authorization to work in the United States. Proof of status will be required upon employment. The Judiciary of the U.S. Virgin Islands is an equal employment opportunity employer and does not discriminate in hiring based on age, race, creed, color, religion, national origin, gender, genetic information, disability, or any other characteristic protected by local or Federal law. This application will remain active for one year after submission.

(PLEASE TYPE OR PRINT LEGIBLY. ILLEGIBLE OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.)

PERSONAL INFORMATION

LAST NAME	FIRST NAME	MIDDLE INITIAL
CURRENT MAILING ADDRESS	STREET OR P.O BOX	CITY
		STATE
		ZIP CODE
DAY-TIME CONTACT NUMBER: () _____		EMAIL ADDRESS: _____

ARE YOU AT LEAST 18 YEARS OF AGE? Y N ARE YOU LEGALLY ENTITLED TO WORK IN THE U.S.? Y N

HAVE YOU EVER WORKED FOR THE SUPERIOR OR SUPREME COURTS BEFORE? Y N IF YES, WHEN AND WHERE (DISTRICT/DIVISION)? _____

ARE YOU RELATED TO ANY EMPLOYEE OF THE SUPREME OR SUPERIOR COURTS? Y N IF YES, PERSON'S NAME AND RELATIONSHIP: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? Y N IF YES, PLEASE ATTACH AN EXPLANATION

HAVE YOU EVER BEEN FIRED, TERMINATED, OR REQUESTED TO RESIGN IN LIEU OF TERMINATION FROM ANY POSITION WITHIN THE PAST 10 YEARS? Y N IF YES, PLEASE ATTACH AN EXPLANATION INCLUDING THE NAME OF THE EMPLOYER AND THE CIRCUMSTANCES SURROUNDING THE SEVERENCE OF YOUR EMPLOYMENT RELATIONSHIP.

POSITION(S) FOR WHICH YOU ARE APPLYING

Please list all positions for which you are applying:

1) _____ 2) _____ 3) _____

DEPUTY MARSHAL APPLICANTS ONLY: ARE YOU AT LEAST 21 YEARS OF AGE? Y N (NOTE: THERE IS A MINIMUM AGE REQUIREMENT FOR MARSHALS)

EMPLOYMENT HISTORY

Beginning with your most recent position, account for your employment during the last ten years. Attach a separate sheet if necessary.

1) Employer (Firm or Agency) _____	Mailing Address: _____
Date of Employment: From: ____/____/____ To: ____/____/____	Starting Salary: \$ _____ Ending Salary: \$ _____
Telephone No.: _____ Supervisor's Name: _____	Position(s) Held: _____
Summary of Duties: _____	
Hours per week: _____ Reason for Leaving: _____	
2) Employer (Firm or Agency) _____	Mailing Address: _____
Date of Employment: From: ____/____/____ To: ____/____/____	Starting Salary: \$ _____ Ending Salary: \$ _____
Telephone No.: _____ Supervisor's Name: _____	Position(s) Held: _____
Summary of Duties: _____	
Hours per week: _____ Reason for Leaving: _____	
3) Employer (Firm or Agency) _____	Mailing Address: _____
Date of Employment: From: ____/____/____ To: ____/____/____	Starting Salary: \$ _____ Ending Salary: \$ _____
Telephone No.: _____ Supervisor's Name: _____	Position(s) Held: _____
Summary of Duties: _____	
Hours per week: _____ Reason for Leaving: _____	

EXPLAIN ANY PERIOD(S) BETWEEN JOBS OR PERIODS OF UNEMPLOYMENT (INCLUDE TIME PERIOD AND REASON). ATTACH A SEPARATE SHEET IF NECESSARY.

MILITARY EXPERIENCE

Branch of Service: _____ Period of Service: From ____/____/____ To: ____/____/____ Type of Discharge: _____
Position Held: _____ Highest Rank Achieved: _____ Special Schools/Training: _____

EDUCATIONAL BACKGROUND

Please provide copies of Diplomas, Transcripts, Certificates, and/or Degrees received.

DATES ATTENDED	SCHOOL ATTENDED	LOCATION	MAJOR/CERTIFICATE/DEGREE OBTAINED
From: ____/____/____ To: ____/____/____	High School:		
From: ____/____/____ To: ____/____/____	College:		
From: ____/____/____ To: ____/____/____	College:		
From: ____/____/____ To: ____/____/____	Other:		

LIST PROFESSIONAL AND/OR SERVICE ORGANIZATIONS IN WHICH YOU ARE ACTIVE:

LIST ANY LANGUAGE OTHER THAN ENGLISH THAT YOU ARE PROFICIENT IN (SPEAK, READ, WRITE, TRANSLATE):

LIST COMPUTER SKILLS, ANY SPECIAL TRAINING OR ACHIEVEMENTS:

SIGNATURE, CERTIFICATION AND RELEASE OF INFORMATION

I certify that the information provided on this application, resume, and on any other document I may furnish, is true and complete. I understand that any false information or significant omissions given on my application, resume, or during an interview will disqualify me from further consideration for employment and will justify termination of my employment if discovered at a later date. I authorize the Judiciary of the U.S. Virgin Islands to obtain information about me from my previous employers, schools, and other organizations named in this application, resume or other documents I submit. I also authorize the persons and entities named to disclose to the Judiciary of the U.S. Virgin Islands such information about me as may be requested. I authorize that any facsimile, electronic signature or photocopy of this release shall be construed and accepted as the original. I understand that my initial and/or continued employment is contingent upon passing mandatory drug tests, criminal background investigations, and employment history checks. I hereby waive and release any claims I may have against the Judiciary of the U.S. Virgin Islands and all other persons, employers, or organizations for furnishing such information.

By signing below, I hereby acknowledge that I have read and understand the above statement.

PRINTED NAME: _____

SIGNATURE: _____

DATE: _____

Applications may be submitted via mail, Attention: Human Resources Division or emailed to jobs@vicourts.org.

St. Thomas-St. John District:

P.O. Box 70 ▪ St. Thomas, VI 00804 or P.O. Box 590 ▪ St. Thomas, VI 00804

St. Croix District:

P.O. Box 929 ▪ Christiansted, St. Croix VI 00821-0929 or P.O. Box 336 ▪ Frederiksted, St. Croix VI 00841

The Judiciary of the U.S. Virgin Islands is an Equal Opportunity Employer