

SUPERIOR COURT OF CALIFORNIA

COUNTY OF KERN



COURT DOCENT VOLUNTEER APPLICATION

All items must be completed

1. Social Security No. _____ - _____ - _____
2. Name: _____
Last First Middle Initial
3. Address: _____
Number & Street City State Zip
4. Home Phone: _____ Cell/Message Phone: _____
5. What Courthouse(s) are you willing to volunteer at? 1415 1215 JJC
6. Hours you can work: _____ per day _____ per week.
7. Days you can work: _____ per week.
8. Bi-lingual language skills:
Language: _____ Speak Write
9. As an adult, have you ever been convicted of an offense other than a minor traffic violation?
 Yes No

If you answered yes, please explain the nature of the conviction below. (Convictions are evaluated for each position and are not necessarily disqualifying.)
10. Are you willing to be fingerprinted and submit to a background investigation? Yes No
11. Will our background investigation reveal the convictions that you have listed? Yes No
12. How did you learn about this position?
 Newspaper School Volunteer Center Website Other _____

•PLEASE COMPLETE NEXT PAGE•

13. Experience: List your most recent paid and volunteer jobs relevant to this position.
This section must be fully completed:

<i>From (Mo/Day/Yr)</i>	<i>Title of Present Position</i>	<i>Company Name</i>	<i>Phone #</i>
<i>To (Mo/Day/Yr)</i>	<i>Number & Street</i>	<i>City</i>	<i>State</i>
<i>Hours per Week</i>	<i>Reason for Leaving</i>		
<i>Description of Duties</i>			
<i>From (Mo/Day/Yr)</i>	<i>Title of Present Position</i>	<i>Company Name</i>	<i>Phone #</i>
<i>To (Mo/Day/Yr)</i>	<i>Number & Street</i>	<i>City</i>	<i>State</i>
<i>Hours per Week</i>	<i>Reason for Leaving</i>		
<i>Description of Duties</i>			

14. Use this space for education information, additional remarks, licenses or certificates, special skills, areas of interest, etc.

15. Do you have any pending court cases in front of the Superior Court. In the event that you are a current Docent, you must notify the Superior Court in any involvement.

Yes No

CERTIFICATE OF APPLICANT: I certify that all statements made in this entire application are true and complete to the best of my knowledge. I understand that any false statements of material facts will subject me to disqualification.

 Name (Please print)

 Signature

 Date

 Witness name (Please print)

 Witness signature

Given the Docents represent the Superior Court, it remains the right to select and terminate the services of Docents at-will.

Please mail to: Kern County Superior Court, 1415 Truxtun, Room 212, Bakersfield, CA 93301; or fax to 661-861-2207