

Los Angeles Superior Court  
Juror Services Division

320 West Temple Street, Room 1510, Los Angeles, CA 90012 (213) 974-5814

FOR COURT USE ONLY

# APPLICATION

## Juror Docent/Volunteer Programs

Date:

Name:		Date of Birth:	
Address:		Home Phone: ( ) - -	
City:	State:	Zip Code: -	
Emergency Contact:		Relationship:	
Address:		Home Phone: ( ) -	
City:	State:	Zip Code: -	
Juror Docent Program:		Other Volunteer Program: (Please Specify)	
<b>EMPLOYMENT INFORMATION:</b> Are you currently    employed    retired    unemployed    student			
Name of Current Employer:			
Address:		Work Phone: ( ) -	Home Phone: ( ) -
City:	State:	Zip Code: -	
Occupation:		May We Contact You At Work? Yes    No	
<b>EMPLOYMENT EXPERIENCE:</b> list your most recent job, then all jobs held in the last five year.			
Dates	Employers	Duties	
From (Mo. & Yr.) /	Name of Present or Last Employer:	Your Title:	Hours per week:
To (Mo. & Yr.) /	Address:	Duties:	
From (Mo. & Yr.) /	Name of Present or Last Employer:	Your Title:	Hours per week:
To (Mo. & Yr.) /	Address:	Duties:	

<b>EDUCATION:</b>		
High School: (Check last grade completed)		
9      10      11      12		
College: (Check last grade completed)		Area of study/degree:
1      2      3      4		
Graduate: (Check last grade completed)		Area of study/degree:
1      2      3      4      5      6      7		
Area you presently attending school?	If yes, where?	Area of study/degree:
Yes      No		
Are you bilingual:	If yes, specify languages:	
Yes      No		
Special Skills:		
Describe prior volunteer experience:		
Have your life experiences included working with people of races and social/economic circumstances different than your own? Please Describe:		
<b>AVAILABILITY:</b>		
THE TIME DEMANDS FOR JUROR DOCENTS/VOLUNTEERS VARY. MOST PROGRAMS REQUIRE A MINIMUM COMMITMENT OF ONE HALF DAY PER WEEK.		
SELECT THE DAYS YOU PREFER AND WRITE 1, 2, AND 3 TO INDICATE YOUR 1 <sup>ST</sup> , 2 <sup>ND</sup> , AND 3 <sup>RD</sup> PREFERENCE YOU WOULD BE AVAILABLE.		
MONDAY 1    2    3	TUESDAY 1    2    3	WEDNESDAY 1    2    3
THURSDAY 1    2    3	FRIDAY 1    2    3	
TOTAL HOURS: REQUIRED (for students):	REQUESTED START DATE:	

Please state why you would like to be a docent/volunteer with the court.

How did you learn about the docent/volunteer program?

What do you hope to achieve as a result of this experience?

**TRAINING:**

SUCCESSFUL COMPLETION OF INITIAL TRAINING MAY BE REQUIRED PRIOR TO ACCEPTANCE INTO COURT VOLUNTEER PROGRAMS.

WITH ADVANCE NOTICE CAN YOU COMMIT TO TRAINING?      YES      NO

*NOTE: MANY EMPLOYERS ALLOW AND ENCOURAGE EMPLOYEE VOLUNTEER SERVICE TO THE COMMUNITY.*

TO THE BEST OF MY KNOWLEDGE THE ABOVE INFORMATION IS TRUE. I UNDERSTAND THAT THIS IS NOT AN APPLICATION FOR EMPLOYMENT AND THAT MY ACCEPTANCE INTO THE SUPERIOR COURT VOLUNTEER PROGRAM DOES NOT CONSTITUTE EMPLOYMENT.

Signature: \_\_\_\_\_

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

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# Security Clearance

The following is required for your Court security clearance.

Name: Last		First	Middle	Other Names Used:	
Address: Street		City	State	Zip	Employee No.:
Drivers license or Cal. ID No./Date of Expiration			Birthdate: (mo.) (day) (year)		Social Security Number:
<b>DESCRIPTION:</b>					
Race:	Sex:	Height:	Weight:	Eye Color:	Hair Color:
1.					
				<b>YES</b>	<b>NO</b>
<p>a) As a juvenile, have you ever been made a ward of the Court or placed on probation? (per Welfare &amp; Inst. Code Section 319, if legally sealed, answer as if offense did occur. If not sealed you must disclose.)</p> <p>b) Have you ever been arrested, convicted, fined, placed on probation, paid court costs, or given a suspended sentence in any court (not minor traffic) in your name or any other name? (Per PC 1203.4(a)) The expunge record of a criminal offense must be disclosed on this information sheet.</p>					
Date	Place (City, State)	Offense	Disposition		
_____	_____	_____	_____		
_____	_____	_____	_____		
_____	_____	_____	_____		
If name used other than above, please state:					
2. Has your Diver's License ever been revoked or suspended? If yes, explain: (Attach additional pages if more space needed)					
Date	Reason				
3. Have you ever been fired or asked to resign? If yes, explain: (Attach additional page if more space needed)					
Date	Reason				
I certify that the above information is true and correct to the best of my knowledge and belief. I understand and agree that any false statement or omission of material fact may cause forfeiture on my part of all rights to service with the Los Angeles Superior Court and Administrative Unified Courts.					
Date: _____			_____		
			SIGNATURE		
<b>FOR OFFICE USE ONLY</b>		<b>APPROVED</b>		<b>DENIED</b>	