

UNITED STATES TAX COURT APPLICATION FOR EMPLOYMENT

If you need additional space, continue under "Remarks" listing item number

1. Name (Last, First, Middle Initial)		
2. Present Address (Street, City, State, Zip)		
3. Email Address	4. Phone Number	
5. Other Names Previously Used for Employment Purposes		
6. Are you a U.S. Citizen	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, please answer questions 7, 8, and 9.
7. If you are not a U.S. Citizen are you a person who is lawfully admitted for permanent residence and is seeking citizenship as outlined in 8 U.S.C. 1324b(a)(3)(B)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8. If you are not a U.S. Citizen are you a person who is admitted as a refugee under 8 U.S.C. 1157 or is granted asylum under 8 U.S.C. 1158 and has filed a declaration of intention to become a lawful permanent resident and then a citizen when eligible?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9. If you are not a U.S. Citizen are you a person who owes allegiance to the United States (i.e., nationals of American Samoa and Swains Island or the Northern Mariana Islands)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
GENERAL		
10. a. Were you ever a federal civilian employee?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, give highest civilian grade: _____
b. Are you receiving a federal civilian annuity payment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
c. Are you receiving federal severance pay?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, give former agency contact/ telephone: _____ _____
d. Have you received a federal separation incentive payment in the past 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, state mo/yr received and former agency contact/telephone: _____ _____

11. Do you have any relatives who are Judges, Officers or employees of the United States Tax Court. Yes No If yes, give their name, position, and relationship to you _____

12. Have you ever served on active duty with the military? Yes No *(If selected, you will need to provide your DD-214 (copy 4), Certificate of Release or Discharge from Active Duty, so that your service may be verified and credited)*

13. a. Are you a male born after December 31, 1959? Yes No If no, skip 13b and 13c. If yes, go to 13b.

b. Have you registered with the Selective Service System? Yes No If yes, provide Selective Service Number: _____

c. If "No," describe your reason(s) below.

EDUCATION

14. a. Do you have a high school diploma or G.E.D. equivalent? Yes No If yes, Date of Completion _____

b. Name and Location of colleges or universities attended <i>(including law schools)</i>	Dates Attended	Credit Hours		Degree	Date Received	Grade Point Average and/or scholastic standing
		Quarter	Semester			

14. c. Other schools or training attended (list name/location of school, dates attended, subject studied, certificates received, and other pertinent data):

JOB RELATED SKILLS, AWARDS, SPECIAL ACCOMPLISHMENTS

15. List any skills (e.g., language, computer, keyboarding speed), honors, awards, or special accomplishments (e.g., memberships in professional/honor societies, leadership activities, performance awards) that you believe are relevant to your ability to perform the job:

APPLICANTS FOR LEGAL POSITIONS

16. a. Are you admitted to the Bar? Yes No If yes, list the Bar(s) to which admitted and date(s) of admission.
If no, skip to 16 b _____

Is your Bar Membership Active Inactive

b. What was your scholastic standing in law school? Upper 1/2 Upper 1/3 Upper 1/4

c. Were you a member of an editorial board of law review or a moot court participant? Yes No

17. REMARKS (Use this space or additional sheets for continuation of answers. List the item number being explained.)

WORK EXPERIENCE

(Start with your present position and work back 10 years. Include any military service. Use additional page if necessary.)

A

Dates of Employment <i>(mm/dd/yyyy)</i> From: _____ To: _____	Number of hours worked per week:	Exact Title of Your Position
Salary or Earnings Starting \$ _____ Per _____ Final \$ _____ Per _____	Pay Plan/Grade <i>(If in Federal Service)</i>	Place of Employment City _____ State _____
Name and Address of Employer <i>(firm, organization, etc.)</i> Business Telephone: <i>(Area Code and Phone Number)</i>		Name and Title of Immediate Supervisor
Reason for Leaving		
Description of Work		

B

Dates of Employment <i>(mm/dd/yyyy)</i> From: _____ To: _____	Number of hours worked per week:	Exact Title of Your Position
Salary or Earnings Starting \$ _____ Per _____ Final \$ _____ Per _____	Pay Plan/Grade <i>(If in Federal Service)</i>	Place of Employment City _____ State _____
Name and Address of Employer <i>(firm, organization, etc.)</i> Business Telephone: <i>(Area Code and Phone Number)</i>		Name and Title of Immediate Supervisor
Reason for Leaving		

Description of Work

C

Dates of Employment (<i>mm/dd/yyyy</i>) From: _____ To: _____	Number of hours worked per week:	Exact Title of Your Position
Salary or Earnings Starting \$ _____ Per _____ Final \$ _____ Per _____	Pay Plan/Grade <i>(If in Federal Service)</i>	Place of Employment City _____ State _____
Name and Address of Employer (<i>firm, organization, etc.</i>) Business Telephone: (<i>Area Code and Phone Number</i>)		Name and Title of Immediate Supervisor
Reason for Leaving		
Description of Work		

D

Dates of Employment (<i>mm/dd/yyyy</i>) From: _____ To: _____	Number of hours worked per week:	Exact Title of Your Position
Salary or Earnings Starting \$ _____ Per _____ Final \$ _____ Per _____	Pay Plan/Grade (<i>If in Federal Service</i>)	Place of Employment City _____ State _____
Name and Address of Employer (<i>firm, organization, etc.</i>) Business Telephone: (<i>Area Code and Phone Number</i>)		Name and Title of Immediate Supervisor
Reason for Leaving		
Description of Work		

APPLICANT CERTIFICATION

I certify that, to the best of my knowledge and belief, all the information on and attached to this application is true, correct, complete and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me, or firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I provide may be investigated.

SIGNATURE _____

DATE SIGNED _____