



OFFICE OF DISTRICT ATTORNEY MICHAEL J. ALLEN

# APPLICATION FOR EMPLOYMENT

The Office of the District Attorney is an Equal Employment Opportunity employer. All applications for employment are considered without regard to race, color, sex, religion, national origin, age, or marital status.

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Office of the District Attorney  
105 East Vermijo Avenue  
Colorado Springs, Colorado 80903  
(719) 520-6000

POSITION APPLIED FOR: \_\_\_\_\_  
Date of Application: \_\_\_\_\_

**PERSONAL HISTORY**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ Evening Phone Number: \_\_\_\_\_

U.S. Citizen? Yes \_\_\_\_ No \_\_\_\_

Have you ever plead to or been convicted of a crime? Yes \_\_\_\_ No \_\_\_\_  
(Include serious traffic offenses)

If yes, please explain: \_\_\_\_\_

Are you related to anyone presently working in this office? Yes \_\_\_\_ No \_\_\_\_

If yes, please explain: \_\_\_\_\_

Referral Source: \_\_\_\_\_

May we contact your present employer? Yes \_\_\_\_ No \_\_\_\_

**QUALIFICATIONS AND SKILLS:**

\_\_\_\_\_

List computer skills and software programs you are familiar with:

\_\_\_\_\_

\_\_\_\_\_

Languages you are fluent in: \_\_\_\_\_

Other skills and considerations: \_\_\_\_\_

**EDUCATION:** (Please list in reverse chronological order)

School: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Address: \_\_\_\_\_

Major: \_\_\_\_\_

Degree: \_\_\_\_\_

School: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Address: \_\_\_\_\_

Major: \_\_\_\_\_

Degree: \_\_\_\_\_

School: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Address: \_\_\_\_\_

Major: \_\_\_\_\_

Degree: \_\_\_\_\_

School: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Address: \_\_\_\_\_

Major: \_\_\_\_\_

Degree: \_\_\_\_\_

**WORK HISTORY: (Please list in reverse chronological order)**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\_\_\_\_\_

**PROFESSIONAL REFERENCES:** Please list the name, address, and phone number of three professional references that we may contact; please include at least one person who supervised you.

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**APPLICANT'S STATEMENT:**

I authorize investigation of all statements contained in my resume or this application for employment as may be necessary in arriving at a hiring decision.

I verify that all information I have provided both orally and in documentary form in connection with my resume or my application for this employment with the 4<sup>th</sup> Judicial District Attorney's Office is true and accurate.

In the event of employment, I understand that the discovery of false or misleading information given in my resume, my application or interview(s) may result in immediate discharge.

I understand that this application is not and is not intended to be a contract of employment.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

## ATTACHMENT TO EMPLOYMENT APPLICATION

All applicants for the District Attorney's Office are required to have a criminal history check before being considered for employment. Please fill in the necessary information and authorize our investigation of such records by signing below. Thank you.

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Date of Birth

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Social Security Number

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Print Name (include any other names used, including maiden or other married names)

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Applicant's Signature



## OFFICE OF THE DISTRICT ATTORNEY

Fourth Judicial District  
105 East Vermijo  
Colorado Springs, CO 80903  
(719) 520-6000 \ FAX (719) 520-6185

Daniel H. May  
District Attorney

Kim Kitchen  
Assistant District Attorney

### AUTHORITY FOR RELEASE OF INFORMATION

I authorize the 4<sup>th</sup> Judicial District Attorney's Office to conduct a complete and thorough investigation of my qualifications for employment. I release any and all persons and parties connected with any investigation from any and all claims or damages arising from providing information about me. I further understand that any offer of employment is contingent upon satisfactory results of such investigations.

I authorize any former employers, persons, schools, companies, and law enforcement authorities to provide any information concerning my background and qualifications for employment to the 4<sup>th</sup> Judicial District Attorney's Office.

\_\_\_\_\_  
Applicant's Name (Please Print)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date