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|  | **SAN DIEGO SUPERIOR COURT** SUPPLEMENTAL APPLICATION FORMCourt Operations Supervisor **PROMOTIONAL EXAMINATION NO. 13-012** |  |
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| --- | --- | --- | --- | --- | --- | --- |
| **LAST NAME:** |  | | | **FIRST NAME:** |  | |
| **SOCIAL SECURITY NUMBER:** | |  | -- |  | -- |  |

**NOTE:** Before completing this supplemental application form, please read the Job Summary and Requirements sections on the job announcement. The information you provide on this supplemental application form will be: (1) used in the determination of candidates’ qualifications, and (2) reviewed during the selection process.

Complete this supplemental application form carefully and entirely, using the lines or spaces where provided. State the details of your acquired knowledge or skills, such as duties or experience or the course content of any education or training, concisely. Wherever specific information has been requested, it MUST be stated. Although you may attach a copy of your résumé to your standard employment application, do NOT make statements on this form such as “Refer to Résumé” or “Refer to Application” in lieu of completing it.

You must complete all sections of this Supplemental Application Form in order to receive consideration. Incomplete or illegible forms may be the basis for disqualification, so please provide complete and legible information.

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**Supplemental Application Form Page 2**

**SECTION 1**

**Legal Clerical Experience**

Please indicate the amount of experience you have processing legal documents in each of the areas listed below:

|  |  |  |
| --- | --- | --- |
| **Area of Law** | **Years** | **Months** |
| Accounting |  |  |
| Appeals |  |  |
| Arbitration/Mediation |  |  |
| Central Records |  |  |
| Civil |  |  |
| Criminal |  |  |
| Domestic Violence |  |  |
| Drug Court |  |  |
| Family Law |  |  |
| Jury Services |  |  |
| Juvenile Delinquency |  |  |
| Juvenile Dependency |  |  |
| Pretrial Services |  |  |
| Probate |  |  |
| Small Claims |  |  |
| Traffic/Minor Offense |  |  |

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**Supplemental Application Form Page 3**

**SECTION 2**

**Supervisory Experience**

Please complete the matrix below by placing an “X” in the appropriate boxes to indicate the supervisory functions you have performed for each of the titles listed.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Title & Number of Those You Supervised** | **Hiring Staff** | **Assign& Review Work** | **Leave Approval** | **Training** | **Counseling & Disciplinary Actions** | **Complaint Resolution** | **Prepare & Conduct Performance Evaluations** |
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Please provide the following information for each of the titles of those supervised which you listed above.

|  |  |  |  |
| --- | --- | --- | --- |
| **Title of Those You Supervised** | **Your Job**  **Title and Employer** | **Your Role**  **(Lead or Supervisor)** | **Length of Time** |
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