

APPLICATION FOR RCAO TEMPORARIES, STUDENT LAW CLERKS, AND STUDENT INTERNS



OFFICE OF THE RAMSEY COUNTY ATTORNEY

345 Wabasha Street North, Suite 120
 Saint Paul, Minnesota 55102-1432
 (651) 266-3222

<https://www.ramseycounty.us/your-government/leadership/county-attorneys-office>

Job Applied for: **Temporary Appointment - Type** (i.e., Attorney, Paralegal, Legal Secretary, Clerk Typist, etc.): _____
 (Please check **Regular Law Clerk**
 all that apply) **1L - Summer Law Clerk Program**
 2L - Summer Law Clerk Program
 Summer Clerical Intern Program
 Paid/Unpaid Academic Internship - Type (i.e., Paralegal, Legal Secretary, etc.): _____

PERSONAL INFORMATION

NAME: (Last, First, Middle) _____

ADDRESS: (Street, City, State, Zip Code) _____

HOME PHONE: _____ **ALTERNATE PHONE:** _____ **EMAIL ADDRESS:** _____

DRIVER'S LICENSE: Yes No **DRIVER'S LICENSE NUMBER:** State: _____ Number: _____ **LEGAL RIGHT TO WORK IN THE UNITED STATES?** Yes No

EDUCATION

DATES: From: _____ To: _____ **NAME:** _____

LOCATION: (City, State) _____ **Did you graduate?** Yes No **DEGREE RECEIVED:** _____

MAJOR: _____ **UNITS COMPLETED:** _____

DATES: From: _____ To: _____ **NAME:** _____

LOCATION: (City, State) _____ **Did you graduate?** Yes No **DEGREE RECEIVED:** _____

MAJOR: _____ **UNITS COMPLETED:** _____

DATES: From: _____ To: _____ **NAME:** _____

LOCATION: (City, State) _____ **Did you graduate?** Yes No **DEGREE RECEIVED:** _____

MAJOR: _____ **UNITS COMPLETED:** _____

DATES: From: _____ To: _____ **NAME:** _____

LOCATION: (City, State) _____ **Did you graduate?** Yes No **DEGREE RECEIVED:** _____

MAJOR: _____ **UNITS COMPLETED:** _____

WORK EXPERIENCE

DATES: From: _____ To: _____ **EMPLOYER:** _____ **POSITION TITLE:** _____

ADDRESS: (Street, City State, Zip Code:) _____

COMPANY URL: _____ **PHONE NUMBER:** _____ **SUPERVISOR:** _____

HOURS PER WEEK:		SALARY:	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No
DUTIES:			
REASON FOR LEAVING:			
DATES: From: _____ To: _____		EMPLOYER:	POSITION TITLE:
ADDRESS: (Street, City State, Zip Code:)			
COMPANY URL:		PHONE NUMBER:	SUPERVISOR:
HOURS PER WEEK:		SALARY:	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No
DUTIES:			
REASON FOR LEAVING:			
DATES: From: _____ To: _____		EMPLOYER:	POSITION TITLE:
ADDRESS: (Street, City State, Zip Code:)			
COMPANY URL:		PHONE NUMBER:	SUPERVISOR:
HOURS PER WEEK:		SALARY:	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No
DUTIES:			
REASON FOR LEAVING:			
DATES: From: _____ To: _____		EMPLOYER:	POSITION TITLE:
ADDRESS: (Street, City State, Zip Code:)			
COMPANY URL:		PHONE NUMBER:	SUPERVISOR:
HOURS PER WEEK:		SALARY:	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No
DUTIES:			
REASON FOR LEAVING:			
CERTIFICATES AND LICENSES			
TYPE:			
LICENSE NUMBER:		ISSUING AGENCY:	
TYPE:			
LICENSE NUMBER:		ISSUING AGENCY:	
TYPE:			

LICENSE NUMBER:		ISSUING AGENCY:	
SKILLS			
OFFICE SKILLS: Typing: _____ Data Entry: _____			
OTHER SKILLS:			
LANGUAGE(S):			
ADDITIONAL INFORMATION			
REFERENCES			
REFERENCE TYPE:	NAME:	POSITION:	
ADDRESS: (Street, City State, Zip Code:)			
EMAIL ADDRESS:		PHONE NUMBER:	
REFERENCE TYPE:	NAME:	POSITION:	
ADDRESS: (Street, City State, Zip Code:)			
EMAIL ADDRESS:		PHONE NUMBER:	
REFERENCE TYPE:	NAME:	POSITION:	
ADDRESS: (Street, City State, Zip Code:)			
EMAIL ADDRESS:		PHONE NUMBER:	

By my signature, I hereby certify that every statement I have made in this application is true and complete to the best of my knowledge, and that I have read the Important Facts About the Information Provided in Your Application notice.

I understand that:

- Any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work.
- I will have to produce documentation verifying identity and employment eligibility in the U.S.
- I may be required to verify any and all information given on this application.
- Ramsey County may contact prior employers and other references.
- Any offer of employment is contingent upon my consenting to and passing a criminal background check.

Signature: _____ Date: _____

IF RETURNING VIA EMAIL ONLY: By checking this box, I certify that I am who I have represented myself to be in this application and that the information supplied is complete and true to the best of my knowledge. I understand that any false information or omission of information from this application may be cause for rejection, or dismissal if employed. I have read the NOTICE TO APPLICANTS and agree to supply the information on this form with full knowledge of the meaning of that NOTICE. I understand that if I am invited to interview for this position, I may be asked to sign this application.

Date: _____

NOTICE TO APPLICANTS

Important Facts Concerning the Information Provided in Your Application

The Minnesota Government Data Practices Act requires you to be informed that the following information which you are asked to provide in the employment process is considered Private Data: Name, Home Address, Phone Numbers, Email Address.

We ask for this information for the following reasons:

- to distinguish you from other applicants and identify you in our files
- to enable us to contact you if additional information is required, send you notices and/or schedule you for an interview
- to enable us to ensure your rights to equal opportunities and to meet affirmative action goals
- to meet federal reporting requirements
- to make processing more efficient

The data supplied may also be used for other purposes necessary for the administration of the Ramsey County Personnel Act and Rules.

Private Data is available only to you and to persons in the County or County-related programs who have a bona fide need for the data. **Public Data** is available to anyone requesting it and consists of data furnished in the employment process which is NOT designated in this notice as Private Data.

If you become a finalist for a position, your name and standing will become public information and may be provided to anyone. If you are hired by Ramsey County, you will be legally required to supply your Social Security Number and other applicable information required by federal and state agencies. Insurance data, which you will be required to furnish in order to participate in County health and life insurance plans, will be classified as private, as will payroll deduction data.