

# APPLICATION FOR PROBATION OFFICER EXAMINATION

## JUDICIAL CONFERENCE OF INDIANA

Indiana Judicial Center  
30 South Meridian Street, Suite 900  
Indianapolis, Indiana 46204-3564  
(317) 232-1313

(Please print or type the following information)

First Name	Middle Name	Last Name	Maiden Name (or previous name)
Street Address		Social Security Number	Date of Birth
City	State	Zip	County
		Home Phone	Business Phone

- .....
1. A \$50.00 non-refundable Application Fee (money order, certified check, or cashier's check only), made payable to INDIANA JUDICIAL CENTER, must be enclosed with your application. Personal checks and cash will not be accepted.
  2. An official transcript must be forwarded directly from your college to this office for your application to be complete.
  3. A copy of a government issued picture identification (driver's license, county identification, etc.) must be included with your application.

List your education accurately and completely:

High School Graduate  
  G.E.D. Certificate  
  Final Semester College  
  College Graduate

University/College Attended:	Major(s):	Dates Attended	Types of Degree Earned	Date Degree Earned
Undergraduate:		From	To	
Graduate:				

1. Have you ever been arrested for any reason other than a minor traffic violation (infraction)?  Yes  No  
If your answer to this question is "Yes", you must attach a detailed personal statement and have Documentation of arrest and disposition from the court having jurisdiction sent directly to the Indiana Judicial Center.
2. Are you a citizen of the United States?  Yes  No

If you are currently employed as a probation officer, please complete the next three lines:

Name of Court	City
Exact title of your position	Starting date as a probation officer
Name of your Chief Probation Officer	Jurisdiction: <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Juvenile

**PLEASE COMPLETE EMPLOYMENT BACKGROUND INFORMATION ON REVERSE SIDE**

**EMPLOYMENT BACKGROUND**

Attach additional information, which will give more complete details regarding your qualifications, skills, knowledge, etc.

Agency name, address and telephone: \_\_\_\_\_

Exact title of position: \_\_\_\_\_

No. of hours worked each week: \_\_\_\_\_ Dates employed: \_\_\_\_\_

Specific duties: \_\_\_\_\_

Name of immediate supervisor: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

.....  
Agency name, address and telephone: \_\_\_\_\_

Exact title of position: \_\_\_\_\_

No. of hours worked each week: \_\_\_\_\_ Dates employed: \_\_\_\_\_

Specific duties: \_\_\_\_\_

Name of immediate supervisor: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

.....  
Agency name, address and telephone: \_\_\_\_\_

Exact title of position: \_\_\_\_\_

No. of hours worked each week: \_\_\_\_\_ Dates employed: \_\_\_\_\_

Specific duties: \_\_\_\_\_

Name of immediate supervisor: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

.....  
**CERTIFICATE OF APPLICANT: I hereby certify, under the penalties of perjury, that there are no misrepresentations in or falsifications of the above statements and my answers to questions. I am aware that should investigations disclose such, my application will be disqualified, causing forfeiture of the application fee, and rejection of future applications to take the examination. I am aware that if future disclosures reveal misrepresentations or falsifications of this application or supporting documents, this could be grounds for revocation of my certification.**

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

\_\_\_\_\_  
Date Signed