

EMPLOYMENT HISTORY REQUEST

JD-AP-120 Rev. 1-08

**CONNECTICUT JUDICIAL BRANCH
COURT SUPPORT SERVICES
ADULT PROBATION**

From (Address of Adult Probation office)

Name of Probation Officer

Name and address of employer

To:

Date:

Return due date:

Re: (Name)

Year of birth

Social Security number (Last 4 digits)

XXX-XX-

Dates individual claims to have been in your employ

Duties

From:

To:

The Superior Court has requested our office to conduct an investigation concerning the above-named individual based on his/her involvement in a criminal matter. It is important for our office to gather information pertaining to this person's employment background. This individual has informed us of being in your employ on the above-noted dates performing the duties specified.

Please complete Section I below and, if the Authorization and Release is signed on the bottom, also complete Section II. The completed form should be returned through the mail to Court Support Services, Adult Probation at the above address by the Return Due Date above. Your anticipated cooperation in this matter is appreciated.

Section I (Employer completes in all cases)

Dates of employment

From:

To:

Was this individual employed steadily during this time? ☐ Yes ☐ No

Type of employment

☐ Full time ☐ Part time

Salary

Section II (Complete only if the authorization and release on the bottom of this form is executed)

1. Evaluation of work performance

2. Briefly describe employee's attitude toward work/employer

3. Describe any problems with this employee

4. Explain any appearance of drug/alcohol use on the job

5. Describe any outstanding performance, work habits

6. If this individual is currently in your employ, how does present conviction affect the employee's status?

7. If this individual is no longer in your employ, state employee's reason for leaving

8. Would you rehire this individual? (Explain)

9. We welcome any additional information you may wish to provide (If additional space is necessary, continue on reverse side)

Signed (Person responsible for providing requested information)

Title

Full name of employer

Authorization And Release

I hereby request and authorize the release of the information requested above to Court Support Services, Adult Probation for the purpose of completing a Court ordered investigation.

Probationer's signature

Date