

ATTORNEY APPLICATION FOR EMPLOYMENT  
DIVISION OF LAW  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
STATE OF NEW JERSEY

The Division of Law provides legal counsel and representation to agencies of State government on many issues vital to the quality of life of New Jersey residents. The Attorney General has a statutory duty to serve as both legal adviser to all “officers, departments, boards, bodies, commissions and instrumentalities” of State government, and to defend State laws. It is through the Division’s attorneys that this mission is accomplished. In the performance of this mission, the Division of Law has a broad scope of work including protection of children from abuse and neglect, preservation of the environment, delivery of quality health care, protection of consumers, preserving the state’s financial assets, and safeguarding civil rights. For more information about the Division of Law please see our website at <http://www.nj.gov/oag/law/home.htm>

A savable application form for the Division of Law is below. Please complete the form and save the file. It is not necessary for you to sign the form at this initial stage of the process. **Your application must include a legal writing sample and your law school transcripts (see page 5 of the application.) Your application will not be considered complete and will not be processed until these documents are received.** While we are awaiting your official law school transcript we will accept a scanned copy to expedite the process. The completed application form should be emailed along with your letter of interest, writing sample and transcript copy to:  
[dolapplicant@lps.state.nj.us](mailto:dolapplicant@lps.state.nj.us)

Related correspondence may be forwarded to:

Susan L. Olgiati, Chief of Staff  
Division of Law  
Richard J. Hughes Justice Complex  
25 Market Street, PO Box 112  
Trenton, New Jersey 08625

\* PRIVACY ACT NOTICE

You need not provide your social security number at this time but it is requested as a convenience to the appointing authority in assembling personal data relating to your employment. Be advised you will be required to provide your social security number if you accept an offer of employment. A background investigation is required for the position for which you are applying. Your social security number will be used as an identifier in performing that investigation. Your social security number will also be used to satisfy requirements under the Internal Revenue and Social Security Acts of the United States.

New Jersey is an Equal Opportunity Employer

APPLICATION FOR EMPLOYMENT

DIVISION OF LAW

DEPARTMENT OF LAW & PUBLIC SAFETY

STATE OF NEW JERSEY

Name: \_\_\_\_\_

Permanent Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Office Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

\* Social Security No: \_\_\_\_\_

Drivers License: State \_\_\_\_\_ License #: \_\_\_\_\_

Admitted to Practice Law: State and Year \_\_\_\_\_

If not a member of the New Jersey Bar, give date on which New Jersey Bar exam will be taken: \_\_\_\_\_

**Educational Record:**

Law School: \_\_\_\_\_ College/University: \_\_\_\_\_

Location: \_\_\_\_\_ Location: \_\_\_\_\_

Date of Admission: \_\_\_\_\_ Date of Admission: \_\_\_\_\_  
(Month & Year) (Month & Year)

Date of Graduation: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_  
(Month & Year) (Month & Year)

Degree: \_\_\_\_\_ Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Class Standing: \_\_\_\_\_ Degree: \_\_\_\_\_

Honors: \_\_\_\_\_ Class Standing: \_\_\_\_\_

Activities: \_\_\_\_\_ Honors: \_\_\_\_\_

Activities: \_\_\_\_\_

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

Location: \_\_\_\_\_

Date of Admission (mo/yr): \_\_\_\_\_ Date of Graduation (mo/yr): \_\_\_\_\_

Degree: \_\_\_\_\_ Class Standing: \_\_\_\_\_

Honors: \_\_\_\_\_ Activities: \_\_\_\_\_

**Employment Record:** (Begin with present position and work back)

1. Name: \_\_\_\_\_ 3. Name: \_\_\_\_\_

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

Position: \_\_\_\_\_ Position: \_\_\_\_\_

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

\_\_\_\_\_

Supervisor: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates in Position: \_\_\_\_\_ Dates in Position: \_\_\_\_\_

Salary: \_\_\_\_\_ Salary: \_\_\_\_\_

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

\_\_\_\_\_

2. Name: \_\_\_\_\_ 4. Name: \_\_\_\_\_

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

Position: \_\_\_\_\_ Position: \_\_\_\_\_

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

\_\_\_\_\_

Supervisor: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates in Position: \_\_\_\_\_ Dates in Position: \_\_\_\_\_

Salary: \_\_\_\_\_ Salary: \_\_\_\_\_

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

\_\_\_\_\_

**Division of Law Contacts and Interest:**

1. Have you served in the Division of Law's Volunteer Associates in Public Service Program? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, who was your supervisor? \_\_\_\_\_.

2. Have you participated in an internship or for-credit extern ship with the Division while in law school? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, who was your supervisor? \_\_\_\_\_.

3. Have you interviewed with a representative of the Division of Law at a job fair or on-campus interview? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, who was the interviewer? \_\_\_\_\_.

4. Please identify the Division of Law Section(s) in which you have a particular interest. The location and descriptions of sections can be obtained at [www.nj.gov/oag/law/sections.htm](http://www.nj.gov/oag/law/sections.htm).

a. \_\_\_\_\_ b. \_\_\_\_\_ c. \_\_\_\_\_

**References:** Set forth at least 3 names, including 2 attorneys, if possible, and 1 law school professor. Note: You do not need to submit a professor's name if you have graduated from law school more than 15 years ago. **Please provide complete addresses and telephone numbers if available.**

- 1. \_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_
- 3. \_\_\_\_\_  
\_\_\_\_\_

Professional Affiliations:  
\_\_\_\_\_  
\_\_\_\_\_

Awards:  
\_\_\_\_\_  
\_\_\_\_\_

Publications:  
\_\_\_\_\_  
\_\_\_\_\_

Civic Activities:  
\_\_\_\_\_  
\_\_\_\_\_

**Miscellaneous:**

F. Have you ever been disciplined by an employer, military  
establishment or educational institution for improper conduct?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_ If so, explain: \_\_\_\_\_

(Note: A response of yes to the above question will  
not necessarily result in a denial of employment)

**Note:** It is the policy of the Division of Law that no applicant will be employed by the Division of Law except on condition that the applicant agrees not to engage in the private practice of law during his or her period of employment and further agrees to remain with the Division for three years from the date of employment.

I hereby certify that the statements made by me in this application are true, complete and correct to the best of my knowledge and belief.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

Attach any other relevant material which you wish to be considered by this office.

If you are contacted for an interview with the Division of Law, and require an accommodation for a disability, please let us know so that appropriate arrangements can be made to facilitate the interview.

Applicant:

Below is a request for a transcript of your scholastic record to be sent to the Division of Law. **PLEASE COMPLETE IT AND SEND IT DIRECTLY TO YOUR LAW SCHOOL IN ORDER TO HAVE YOUR TRANSCRIPT FORWARDED FOR INCLUSION IN YOUR FILE.**

I will receive(d) a \_\_\_\_\_ degree in \_\_\_\_\_ from \_\_\_\_\_  
(Year)

\_\_\_\_\_ Law School located at

\_\_\_\_\_  
(Address)

In connection with my application for employment, I hereby authorize the \_\_\_\_\_ School of Law to forward a transcript of my scholastic record to:

Susan Olgiati, Chief of Staff  
Division of Law  
Richard J. Hughes Justice Complex  
25 Market Street, PO Box 112  
Trenton, New Jersey 08625

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed: \_\_\_\_\_

# STATE OF NEW JERSEY AFFIRMATIVE ACTION INFORMATION FORM

To Be Completed By Applicant  
Not For Interview Purposes  
To Be Filed Separately With  
Affirmative Action Officer

The *State of New Jersey* seeks to increase the richness and diversity of its workforce and in doing so become the employer of choice for all people seeking to work in State government. In order to judge the effectiveness of our efforts to attract and employ a diverse workforce, as well as comply with Federal and State reporting requirements, we ask that you take the time to answer a few brief questions.

***This form is not part of your application for employment and will not be considered in any hiring decision.*** Any information submitted on this form will be considered confidential and will be filed separately by the agency's affirmative action officer.

The *State of New Jersey* is an equal opportunity employer. The *New Jersey State Policy Prohibiting Discrimination in the Workplace* provides that applicants for employment are considered without regard to race, creed, color, national origin, nationality, ancestry, sex/gender, affectional or sexual orientation, gender identity or expression, age, marital status, civil union status, domestic partnership status, familial status, religion, atypical heredity cellular or blood trait, genetic information, liability for service in the Armed Forces of the United States or disability.

APPLICANT NAME: (Last, First, M)

APPLICANT ADDRESS:

POSITION(S) APPLIED FOR:

DATE:

DIVISION:

GENDER:

Male  Female

**A. Ethnicity:** (Please Select One)

**Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

**Not Hispanic or Latino**

**B. Race:** (Please Select one)

**American Indian or Alaska Native:** A person having origins in any of the original peoples of North and South America (including Central America), who maintains tribal affiliation or community attachment.

**Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

**Black or African American:** A person having origins in any of the black racial groups of Africa.

**Native Hawaiian or Other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

**White:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**The EEOC has recently updated its data collection requirements to allow employees who may be of two or more races to identify themselves. If you are of more than one race please identify them below.**

**C. Two or More Races:** (If applicable, select the two or more races with which you identify)

American Indian or Alaska Native

Black or African American

White

Asian

Native Hawaiian or Other Pacific Islander

**If you require an accommodation for the interview process please advise the HR representative at the department where you are applying for the job.**

**REFERRAL SOURCE:**

How did you learn of this position? \_\_\_\_\_