



APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION**DATE OF APPLICATION:** _____**Name:** _____
(LAST) (FIRST) (MIDDLE)**Physical Address:** _____
(Street) (Apt.#) (City,) (ST) (Zip)**Mailing Address:** _____
(Street) (Apt.#) (City,) (ST) (Zip)**Contact Information:** () _____ () _____
(Home Telephone) (Mobile) (Email Address)**Are you at least 18 years old?** () Yes () No **are you a licensed Driver?** () Yes () No**Valid California Driver's License#** _____ **Expired Date:** _____**Have you ever worked for this City?** () Yes () No, if yes, when and what department? _____**How did you learn about our City?** _____**Position Sought:** _____ **Available Start Date:** _____**Are you currently employed?** () Yes () No

EDUCATION

	Name and Location	Graduate?-Degree?	Major/Subject of Study
Grammar School			
High School			
College or University			
Specialized Training, Trade School, etc.			
Other Education			

Previous Work Experience

Please list most recent job first:

Company Name: _____ **Address:** _____

Date Started: _____ **Date Finished:** _____ **Job Title/Role** _____

Reason for Leaving: _____

List Job Task or Description: _____

Company Name: _____ **Address:** _____

Date Started: _____ **Date Finished:** _____ **Job Title/Role** _____

Reason for Leaving: _____

List Job Task or Description: _____

Company Name: _____ **Address:** _____

Date Started: _____ **Date Finished:** _____ **Job Title/Role** _____

Reason for Leaving: _____

List Job Task or Description: _____

Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position

Reference:

Below give the names of three (3) persons you are not related too, whom you have known at least one (1) year.

Name	Address	Business	Phone#	#of Years

AUTHORIZATION:

“I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and all the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have. Personal or otherwise and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the City has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing unless it is writing and signed by an authorized company representative”

Signature

Date

DO NOT WRITE ON THIS PAGE

FOR INTERVIEWER'S USE ONLY

INTERVIEWED BY: _____

DATE: _____

COMMENTS:
