

Application for Employment – City of Willits, CA

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status

(Please Print or Type)

Position(s) applied For	Date of Application
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How did you Learn About Us?

Advertisement Relative Inquiry
 Employment Agency Friend Other _____

Last Name	First Name	Middle Name			
Address	Number	Street			
		City			
		State			
		Zip Code			
Telephone Number(s)		Social Security Number			
		<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border-right: 1px solid black; height: 20px;"></td> <td style="width: 33%; border-right: 1px solid black; height: 20px;"></td> <td style="width: 34%; height: 20px;"></td> </tr> </table>			

Best time to contact you at home is

If you are under 18 years of age can you provide required Proof of your eligibility to work?..... Yes No

Have you ever filed an application with use before? Yes No

If Yes, give date _____

Have you ever been employed with use before?..... Yes No

If Yes, give date _____

Do any of your friends or relatives, other then your spouse, work here? Yes No

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this Country because of Visa or Immigration Status?..... Yes No
 (Proof of citizenship or immigration status will be required upon employment)

Date available for work ____/____/____

Are you available to work: Full Time (please indicate 1 2 3 shift)
 Part Time (please indicate Mornings Afternoon Evenings)
 Temporary (please indicate dates available ____/____/____ - ____/____/____)

Are you currently on “lay-off” status and subject to recall?..... Yes No

Can you travel if a job requires it? Yes No

	Name and Address of School	Courses of Study	Years Completed	Diploma Degree
High School				
Elementary School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job related training received in the United States military.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
2	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
3	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
4	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

List Professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

SPECIALIZED SKILLS

(Check Skills/Equipment Operated)

<input type="checkbox"/> Terminal	<input type="checkbox"/> Spreadsheet	Production/Mobile	
<input type="checkbox"/> PC/MAC	<input type="checkbox"/> Word Processing	Machinery(list)	Other(list)
<input type="checkbox"/> Typewriter	<input type="checkbox"/> Shorthand	_____	_____
WPM _____	WPM _____	_____	_____
		_____	_____
		_____	_____

State any additional information you feel may be helpful to us in considering your application.

Note to applications: **DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.**

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. YES NO

References

1.	()
(Name)	Phone #
2.	()
(Name)	Phone #
3.	()
(Name)	Phone #

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written documentation or conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer:

Signature of Applicant

Date

For Personnel Department Use Only

Arrange Interview ___ Yes ___ No

Remarks _____

Interviewer Date

Employed _____ Yes _____ No

Date of Employment _____

Job title _____

Hourly/ Rate
Salary _____

Department

By _____

Name and Title

Date