EMPLOYMENT APPLICATION

CITY OF SANTA CRUZ

Clear Form

Human Resources Department
809 Center Street • Room 6
Santa Cruz, CA 95060
(831) 420-5040 • Fax (831) 420-5041
Visit our website at: www.ci.santa-cruz.ca.us

FOR HR USE ONLY:

Disposition

Screened by
❑Y ❑N
Veterans Pref
❑Y ❑N
Special Accommodation:

EXACT TITLE OF POSITION FOR WHICH YOU ARE APPLYING _____

RECRUITMENT NUMBER (SEE JOB ANNOUNCEMENT) _____

Type or print using black or dark blue ink. This application must be completed in full. A separate application must be completed for each position. All statements are subject to verification. If you move, you must notify the Human Resources Department in writing of your new address and phone number. **If you have questions regarding how to complete this application form, contact the Human Resources Department.**

SOCIAL SECURITY NUMBER | LAST NAME, | FIRST NAME, | MIDDLE INITIAL | HOME TELEPHONE ( )

STREET NUMBER AND STREET NAME (OR P.O. BOX) | BUSINESS/MESSAGE PHONE ( )

CITY | STATE | ZIP CODE | E-MAIL ADDRESS

DO YOU POSSESS A VALID DRIVER'S LICENSE? ❑ YES ❑ NO

ISSUING STATE: _____ LICENSE NUMBER: _____ EXPIRATION DATE: _____ LICENSE CLASS: _____

Are you a citizen of the United States or do you have a legal right to work in the United States? (Written proof of citizenship or right to work will be required at time of hire.)

❑ YES ❑ NO

BILINGUAL LANGUAGE SKILLS:

Language _____ ❑ SPEAK ❑ WRITE ❑ TRANSLATE

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Check the work schedule(s) you will accept. You will be considered only for the schedule(s) selected. Do not check those you are unwilling to accept.

❑ FULL-TIME ❑ TEMPORARY
❑ PART-TIME ❑ ON-CALL

If you fail to respond to the following question completely and clearly as directed herein, your application will be rejected. As an adult, have you ever been convicted of a misdemeanor, felony or infraction, or been on parole or probation? ❑ YES ❑ NO

If yes, you must list all convictions since your 18th birthday on an attached sheet. Include offense (please specify whether the conviction was for a felony, misdemeanor or infraction), date of offense, place of conviction, dates of probation and/or parole. You are not required to disclose information regarding participation in a pre-trial or post-trial diversion program, misdemeanor convictions that have been judicially dismissed pursuant to Penal Code section 1203.4 or offenses set forth in Labor Code section 432.8 unless you are applying for a position as a Police Officer. Except as specified below, a yes answer will not automatically disqualify you from appointment. **Failure to disclose misdemeanor or felony convictions will result in termination or denial of employment. Newly hired employees are subject to being fingerprinted, to verify conviction history, prior to start of work.**

Pursuant to California Public Resources Code Section 5164, the City is prohibited from hiring an employee or volunteer to perform services at a park, playground, recreation center or beach, in a position having supervisory or disciplinary authority over any minor, when that person has been convicted of specified offenses. You may obtain a CODE SECTION 5164 SCREENING FORM, which includes applicable offenses, from the Human Resources Department.

EDUCATION: Check the appropriate box if you possess one of the following:

❑ High School Diploma ❑ G.E.D. Certificate

❑ California High School Proficiency Certificate

CHECK HIGHEST GRADE COMPLETED

1 2 3 4 5 6 7 8 9 10 11 12 COLLEGE 1 2 3 4

POST GRADUATE WORK _____ YEARS

Colleges, Universities, Vocational Technical Schools Attended	City/State	Major or Course of Study	Total Units Completed Semester	Quarter	Degree or Certificate	Dates Attended From /	To

Name: _____ Social Security _____

LICENSES / CERTIFICATES

List any licenses, certificates or registrations relevant to this position. Attach a copy of any required certification (see job announcement).

Title	Number	Issued By	Expiration Date

EMPLOYMENT HISTORY: Please list most recent employment first. Resumes will not be accepted in place of a completed application form. Respond completely to all information in this section. List all experience, including volunteer and military. Additional sheets may be attached to this application, if necessary, to fully describe related experience, training, and education. It is your responsibility to make and keep a copy of your completed application form and attachments.

BUSINESS OR AGENCY NAME AND ADDRESS:	DATES EMPLOYED:	JOB TITLE: NUMBER OF PERSONS SUPERVISED
PHONE: SUPERVISOR'S NAME: MAY WE CONTACT THIS EMPLOYER? YES NO REASON FOR LEAVING:	FROM: TO: TOTAL: / YRS/MO HOURS: PER WEEK FINAL SALARY: $ HOURLY MONTHLY	DUTIES:
BUSINESS OR AGENCY NAME AND ADDRESS:	DATES EMPLOYED:	JOB TITLE: NUMBER OF PERSONS SUPERVISED
PHONE: SUPERVISOR'S NAME: MAY WE CONTACT THIS EMPLOYER? YES NO REASON FOR LEAVING:	FROM: TO: TOTAL: / YRS/MO HOURS: PER WEEK FINAL SALARY: $ HOURLY MONTHLY	DUTIES:
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AGREEMENT: I understand that any misrepresentation or deliberate omission in my application may be justification for termination or refusal of employment. If required, I agree to undergo a physical examination if a job offer is made and understand that employment is contingent upon meeting the City's physical requirements. I also authorize employers, schools or persons named in this application to give any information regarding my qualifications and character. I hereby release said employers, schools, persons and the City from any liability for damages for receiving or releasing information. I, if requested, agree to be fingerprinted. I further agree to furnish proof of citizenship or right to work.

Signature _____ Date _____

The City of Santa Cruz is an Equal Opportunity Employer. We are required by the federal government to maintain certain statistical information on job applicants and employees. To assist us with this, we would appreciate your voluntary cooperation in answering the questions on both sides of this questionnaire. **This form will be detached from your application and will be kept separate and confidential from any employment decision.**

NAME: _____ POSITION APPLYING FOR: _____

SEX: ❑ FEMALE ❑ MALE

RECRUITMENT NUMBER: _____

ETHNIC ORIGIN (choose only one):

A. ❑ CAUCASIAN/WHITE: All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East (not of Hispanic origin).

B. ❑ AFRICAN-AMERICAN/BLACK: All persons having origins in any of the Black racial groups of Africa (not of Hispanic origin).

C. ❑ LATINO/HISPANIC: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

D. ❑ NATIVE AMERICAN/ALASKAN NATIVE: All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

E. ❑ ASIAN/PACIFIC ISLANDER: All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, Hawaii and Samoa.

Indicate how you learned about this position:

❑ City Human Resources Department

❑ City of Santa Cruz website

❑ Santacruzjobs.com

❑ Internet ad. Which one: _____

❑ An ad in newspaper or publication. Which one: _____

❑ A friend or relative

❑ A City employee. Name: _____

❑ Job announcement or poster on bulletin board

❑ Job Interest Card

❑ City JOBLINE

❑ Other: _____

Do you require special accommodation for testing or interviewing?
If so, notify Human Resources at the time you submit your application.
❑ YES ❑ NO TYPE: _____

Are you a current employee of the City of Santa Cruz?
❑ YES ❑ NO

Do you claim Veterans Service Preference?
(If yes, attach a copy of your DD214.)
❑ YES ❑ NO

Are you a Vietnam era veteran?
❑ YES ❑ NO

Are you a disabled veteran? (If yes, attach a copy of verification from the Department of Veterans Affairs.)
❑ YES ❑ NO
Disability rating _____

Are you over 40?
❑ YES ❑ NO