Job Applying For			AGENCY					
JOB TITLE								
Basic Information								
NAME								
First			<u>M.I.</u>	Last				
ADDRESS								
Address Line 1				Address Lir	ne 2			
City		State/Province/ Region		Postal/ Zip Code		Country		
TELEPHONE								
Primary		Secondary				Are you eligi	ible to	Yes
						WOIK III the	0.5.:	—
DRIVER'S LICENSE								
D.L. Number	D.L. State	D.L. Class	EMA	AIL				
Education Highest year completed HS ATTENDED		9 10 11 12	Did you gr LOCATI OF HS/0	ON	n High School	l or receive a G	ED?	
Highest year completed	than 8 8		LOCATI	ON	n High School	l or receive a G	ED?	
Highest year completed	than 8 8		LOCATI	ON		l or receive a G	ED?	□
Highest year completed HS ATTENDED List any degrees received or	than 8 8		LOCATI OF HS/0	ON				□
Highest year completed HS ATTENDED List any degrees received or	than 8 8		LOCATI OF HS/0	ON				□
Highest year completed HS ATTENDED List any degrees received or	than 8 8		LOCATI OF HS/0	ON				□
Highest year completed HS ATTENDED List any degrees received or School Name	in progress		LOCATI OF HS/0	ON				Yes Units
Highest year completed HS ATTENDED List any degrees received or School Name	in progress		LOCATI OF HS/0	ON				□
Highest year completed HS ATTENDED List any degrees received or School Name Specialized Training	in progress	Lo	cation (City & State)	GED				□
Highest year completed HS ATTENDED List any degrees received or School Name Specialized Training List specialized training which	in progress	Lo	cation (City & State)	GED C.		Major		Units
Highest year completed HS ATTENDED List any degrees received or School Name Specialized Training List specialized training which	in progress	Lo	cation (City & State) on or license, etc	GED C.		Major	Degree	Units
Highest year completed HS ATTENDED List any degrees received or School Name Specialized Training List specialized training which	in progress	Lo	cation (City & State) on or license, etc	GED C.		Major	Degree	Units
Highest year completed HS ATTENDED List any degrees received or	in progress	Lo	cation (City & State) on or license, etc	GED C.		Major	Degree	Units
Highest year completed HS ATTENDED List any degrees received or School Name Specialized Training List specialized training which	in progress ch yielded certifica	tion, accreditation	cation (City & State) on or license, etc	GED C.		Major	Degree	Units

Work Exp	erience erience			I have no _I	previous work experience
May we conta	nct your current or most I	recent employer?			Yes No
work experi	ur current or most recent ience or stating 'See uld be attached to an app	Resume' will be consi	cord history and incluidered an incompl	ude any other pertinent on the control of the contr	experience. Failure to list subject to rejection.
COMPANY NA	AME				
Address				Telephone	
Job title		Start date	End date	Reason for leaving	
Hours/wk.	Mo. salary \$	Supervisor			# of employees you supervised
Describe this v	work experience (do not w	vrite "See Resume")			
COMPANY NA	AME				
Address				Telephone	
Job title		Start date	End date	Reason for leaving	
Hours/wk.	Mo. salary \$	Supervisor			# of employees you supervised
Describe this v	work experience (do not w	vrite "See Resume")			
COMPANY NA	AME				
Address				Telephone	
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Hours/wk.	Mo. salary \$	Supervisor			# of employees you supervised
Describe this v	work experience (do not w	vrite "See Resume")			

Address				Telephone	
Job title		Start date	End date	Reason for leaving	a
Hours/wk.	Mo. salary \$	Supervisor			# of employees you supervised
HOUIS/WK.	ivio. Salary \$				you supervised
Describe this	work experience (do not v	vrite "See Resume")			
COMPANY N	AME				
Address				Telephone	
Job title		Start date	End date	Reason for leaving	
Hours/wk.	Mo. salary \$	Supervisor			# of employees you supervised
If you would	like to provide additional	l work experience, please	list on a separate she	eet and attach to appl	lication.
	like to provide additional	l work experience, please	list on a separate she	eet and attach to appl	lication.
Addition			elist on a separate sho	eet and attach to appl	lication.
Addition	al Experience		elist on a separate sho	eet and attach to appl	lication.
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Addition	al Experience		list on a separate she	eet and attach to appl	lication.
Addition	al Experience		list on a separate sh	eet and attach to appl	
Additional List any additional List and Lis	al Experience tional experience (voluntee	vring, internship, etc.):			Yes
Additional List any additional Work Quarter Are you over	al Experience tional experience (voluntee) alifications 18 years of age?				Yes
Addition List any addit Work Qu Are you over (Employment is so	al Experience tional experience (voluntee) alifications 18 years of age?	ering, internship, etc.):	any jobs for which you may	apply)	Yes Yes

Work Qualifications cont.				
Have you ever been convicted for a viola	ation of the law, exclu	uding minor traffic violation	ons?	Yes No
For each offense please list: the violation; the court (in convicted. Exclude traffic violations under \$150 and cc as it relates to marijuana. Each case will be given indivivill be grounds for termination. Note that conviction is	cluding military); the place an nvictions more than two yea dual consideration. Failure to	d date of conviction; the penalty (f rs old for violation of Health and Sa list all convictions other than those	ine, sentence, date(s) of proba afety Code Sections 11357 (b o e excluded above will be consid	ition), and the name under which or c), 11360(b), 11364, 11365, and 11550, dered fraud in securing appointment and
Have you ever been discharged or reque any position for misconduct or unsatisfa If "Yes", please explain fully				Yes No
Job Origin				
I first learned of this job opening throug	h (please check one)			
CITY RELATED NEWSPAPERS	INTERNET	PUBLIC SECTOR PUBS	SPECIALIZED PUBS	OTHER
Human Resource Dept. San Francisco Chrick City Employee Jobs Available City Job Bulletin San Jose Mercury City Website Contra Costa Time City Job Hotline Sacramento Bee Direct Mailer Job Fair	Craigslist.org News Monster.com	Jobs Available Western City ICMA Newsletter City & State	☐ The Recorder ☐ Daily Journal ☐ Planners Network ☐ APA	CA Job Journal

DISABLED APPLICANTS: The Agency will make reasonable accommodations in the exam process to accommodate disabled applicants. If you are invited to participate in any test process and have a disability for which you require an accommodation, please contact the agency.

I hereby certify that all statements made in this application are true and I agree and understand that any misstatement or omission of material fact will cause forfeiture on my part of all rights of employment with the Agency. I authorize investigation of all matters contained in this application. If offered a position, I further agree to submit to a complete medical examination by a City physician as a condition of employment. I further agree to be fingerprinted, to sign an oath of office, and to furnish proof of age, education, and either citizenship or the legal right to work in the United States of America upon appointment.

Equal Employm	nent Opportunity	Questionnaire
	the effectiveness of our I	nformation is voluntary and is gathered in accordance with State and Federal laws for the Equal Employment Opportunity policy and recruitment efforts. This information will not be
ETHNICITY Caucasian African	n-American	Asian/Pacific Islander
GENDER Male Female	VETERANS STATUS Yes No	DISABILITIES (check all that apply) None Hearing Sight Speech Other