



# CITY OF GRASS VALLEY

## EMPLOYMENT APPLICATION AN EQUAL OPPORTUNITY EMPLOYER

A separate application is required for each position.

POSITION APPLYING FOR: \_\_\_\_\_ DATE: \_\_\_\_\_

DESIRED WORK SCHEDULE:  FULL TIME  PART TIME  TEMPORARY  SHIFT

WHEN ARE YOU AVAILABLE TO BEGIN WORK? \_\_\_\_\_

NAME (FIRST, MIDDLE, LAST): \_\_\_\_\_

If you have worked under a different name, what was your former name and with what employer?

CURRENT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ARE YOU 18 YEARS OR OLDER?  YES  NO

CA DRIVER'S LICENCE NUMBER: \_\_\_\_\_ CLASS: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

Provide this information only if a license is necessary to perform an essential function of this position.

An acceptable driving record may be required prior to employment. If you become an employee of the City, you may be required to use your own vehicle during City business.

If hired can you produce documentation of U.S. Citizenship or Legal Work Permits to comply with the Immigration & Naturalization Act?  YES  NO

ARE YOU ON LAYOFF AND SUBJECT TO RECALL?  YES  NO

In the last ten years have you been discharged or forced to resign from employment for misconduct or cause?  YES  NO If yes, identify all employers, dates, and reasons (attach additional sheets if necessary):

\_\_\_\_\_  
\_\_\_\_\_

Can you perform the essential job functions of this position with/without accommodations?  YES  NO

Do you have any relatives employed by the City?  YES  NO

If yes, please provide name and relationship: \_\_\_\_\_

PROFESSIONAL OR TRADE LICENSE, CERTIFICATE OR REGISTRATION (if relevant):

Type: \_\_\_\_\_ No. \_\_\_\_\_ Issue Date: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

SPECIAL SKILLS (Indicate any special skills you have that could contribute to your success in the position, e.g., computer program knowledge, etc.): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# EDUCATION AND EMPLOYMENT HISTORY

DID YOU GRADUATE FROM HIGH SCHOOL?  YES  NO

If no, do you have a GED Certificate?  YES  NO  N/A

COLLEGE, BUSINESS OR TRADE SCHOOL	MAJOR	DEGREE EARNED	DATES ATTENDED

RESUME WILL NOT SUBSTITUTE FOR A COMPLETED APPLICATION FORM.

LIST ALL EMPLOYMENT HISTORY DURING THE LAST 10 YEARS, BEGINNING WITH MOST RECENT.  
PLEASE INCLUDE/ATTACH MILITARY SERVICE AND RELEVANT VOLUNTEER WORK, IF APPLICABLE.

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_ Schedule: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Duties: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_ Schedule: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Duties: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_ Schedule: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Duties: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

### JOB RELATED WORK REFERENCES

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

I authorize the employers, educational institutions and references listed to give the City any information concerning my previous employment, education, and any pertinent information they may have. I release all parties from liability for any damages that may result from furnishing same to City.

Which employer(s) would you prefer the City not contact? \_\_\_\_\_ Why? \_\_\_\_\_

### CERTIFICATION OF APPLICANT

I CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND COMPLETE, AND THAT ANY MISSTATEMENT OF MATERIAL FACTS MAY SUBJECT ME TO DISQUALIFICATION OR DISMISSAL.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_