

↑ *Employer Name & Address*

↑ *Job Title* *Dates of Employment* *Salary* *Hours Per Week*

Description of Duties: _____

No. Supervised: _____

Supervisor: _____ *Phone* _____

Reason for Leaving: _____

↑ *Employer Name & Address*

↑ *Job Title* *Dates of Employment* *Salary* *Hours Per Week*

Description of Duties: _____

No. Supervised: _____

Supervisor: _____ *Phone* _____

Reason for Leaving: _____

↑ *Employer Name & Address*

↑ *Job Title* *Dates of Employment* *Salary* *Hours Per Week*

Description of Duties: _____

No. Supervised: _____

Supervisor: _____ *Phone* _____

Reason for Leaving: _____

EDUCATION:

List your high school, college, business, trade, correspondence, or other courses below that are related to the position.

1) _____
School/Location

Credit Hours	Major	Degree/Certificate Received
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2) _____
School/Location

Credit Hours	Major	Degree/Certificate Received
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3) _____
School/Location

Credit Hours	Major	Degree/Certificate Received
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Some positions require certification in the State of California. Please list, if applicable, and *attach a copy*.

1) _____

Certificate Received	Certificate Number	Expiration Date
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2) _____

Certificate Received	Certificate Number	Expiration Date
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ADDITIONAL INFORMATION:

Additional information covering your qualifications or interests pertinent to the job for which you are applying, including additional school courses/training not covered above, may be attached to this application.

1. Do you speak or write any Foreign Languages? Yes No
If yes, what language do you speak or write: _____

2. Have you had active military service in the U.S. Armed Forces? Yes No
If yes, please indicate the following

Branch of Service/Serial Number/Dates of Enlistment and Discharge

3. Were you ever employed by the City of Encinitas? Yes No
(Please indicate dates of previous employment in the space provided below.)

4. Relatives of **certain** City officials and employees are prohibited from working for the City. Are any of your relatives employed by the City of Encinitas? Yes No
(If yes, please list names below.)

5. Have you ever been a member of the **California Public Employee's Retirement System**? Yes No
(If yes, please list names of agencies below.)

6. A criminal record does not constitute an automatic bar to employment. Have you ever been convicted of a crime? Yes No
(Please exclude misdemeanor convictions for marijuana-related offenses more than two years old; convictions that have been sealed, expunged, or legally eradicated; and misdemeanor convictions which were discharged and the case judicially dismissed.)

7. Can you perform the essential functions of the position with or without reasonable accommodation? Yes No

8. Certain positions require a valid **California** driver's license. Have you ever been cited and convicted of **any** vehicle code violation other than a parking violation? Yes No
(If yes, please explain in space provided below.)

Driver's License Number: _____ **State:** _____ **Expiration Date:** _____

If you answered "No" to question #7 above or "Yes" to any of the remaining questions, please use the space below for comments. [If you answered yes to #6, briefly describe the nature of the crime(s), the date and place of conviction(s), and the legal disposition of the case(s).]

ADDITIONAL EXPERIENCE:

Please list any computer software you have used in the past and the number of years experience with that software.

<u>SOFTWARE</u>	<u># OF YEARS</u>	<u>SOFTWARE</u>	<u># OF YEARS</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PLEASE IDENTIFY, IN THE SPACE PROVIDED BELOW, WHAT YOU SPECIFICALLY USED THE SOFTWARE TO ACCOMPLISH (i.e., statistical, correspondence, technical applications, graphics, etc.)

AFFIDAVIT - READ VERY CAREFULLY

I am aware that the City of Encinitas is a drug free workplace and I certify that I have read and meet the specific requirements listed on the announcement for this examination, with or without reasonable accommodation. I understand that further requests for proof of qualifications may be required and if upon their inspection I am determined to not meet specific job requirements, I will be disqualified.

All answers and statements in this application are true and complete to the best of my knowledge and any untruthful or misleading answer will be cause for rejection of my application, removal of my name from an eligibility list, or my dismissal from City employment.

I understand that in order for the City to verify the accuracy of the information contained in my application, it is necessary for Human Resource Department representatives to obtain information which may concern me regarding my references, education or training, prior employment, and criminal conviction history including driving record. If found to be a finalist for the position, I understand fingerprinting is required by Encinitas City Policy upon hiring (*Labor Code 1051*).

I am aware that the City of Encinitas has the right to obtain any public record information for employment which include but is not limited to; evaluation for employment, assignment, promotion and investigation into possible misconduct.

I declare to have read and understand the previous information and hereby consent to the release of information as described in this application.

Optional

<input type="checkbox"/> I request a copy of any public records obtained by the City of Encinitas regarding my application for employment. I also understand if the City takes adverse action based on the information contained in these records, a copy of the record will be sent regardless of choice.
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Optional

<input type="checkbox"/> I request a copy of any records obtained by a third party for the City of Encinitas regarding my application for employment.

Note:

- In the case that none of the boxes are checked, it will be assumed you have chosen not to receive any records.
- All records requested would be sent to the address listed on the application.

Applicant Signature

Date

*A signature of consent is required to process this application.
In the absence of a signature, this application will be withdrawn from consideration.*

I hereby release any employer or department, their representatives, and any person furnishing information to the City of Encinitas regarding my employment from all liability of every nature arising out of the furnishing of such information.

Applicant Signature

Date

SOCIAL SECURITY NUMBER:

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CITY OF ENCINITAS
EQUAL EMPLOYMENT OPPORTUNITY RESEARCH PROJECT

To further its commitment to equal employment opportunity, the City of Encinitas requests that applicants **voluntarily** provide the following information. This information will be detached from the application and will be available for research and evaluation purposes **only**. Your cooperation is essential to the success of this program. This information will have absolutely no effect on our selection process. Thank you for your cooperation.

POSITION TITLE: _____

DATE: _____

NAME: _____

SEX: ____M ____F

AGE: Over 40 Under 40

CITY OF RESIDENCE: _____

I consider myself a member of the following racial/ethnic group (check one only):

_____ American Indian/Alaskan Native

_____ African American

_____ White

_____ Asian/Pacific Islander

_____ Hispanic

Can you perform the essential functions of the position with or without reasonable accommodation?

___Yes ___No

How did you learn about this position? (Check One)

San Diego Union Tribune _____

North County Times _____

Beach News _____

Jobs Available _____

Internet _____

City of Encinitas Web site _____

City Hall Flier _____

Employee Referral _____

Flier at other city/agency _____

Western Cities _____

Los Angeles Times _____

Orange County Register _____

Phone in _____

Walk in _____

Other _____