

# **CITY OF FIREBAUGH**

1133 P Street FIREBAUGH, CALIFORNIA 93622 (559) 659-2043 · FAX (559) 659-3412

### **Application For Employment**

We consider applications for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEA)	SE PRINT)				
Position(s) Applied For			Date of Ap	plicatio	n
How Did You Learn About Us?					
Last Name First Name		Middle	Name		
Address Number Street	City	State	Zip Code		
Telephone Number(s)					
If you are under 18 years of age, can you provide required proof of your eligit	pility to work?		Yes		No
Have you ever filed an application with us before?			Yes		No
		If Yes, give dat	-		N
Have you ever been employed with us before?			Yes		No
		If Yes, give dat	-		
Are you currently employed?			Yes		No
May be contact your present employer?			Yes		No
Are you prevented from lawfully becoming employed in this country because	of Visa or Immigration Status?		Yes		No
On what date would you be available to work?					
Are you available to work:	Shift Work D Temporary				
Are you currently on "lay off" status and subject to recall?			Yes		No
Can you travel if a job requires it?			Yes		No
			Yes		No

#### WE ARE AN EQUAL OPPORTUNITY EMPLOYER

		Elementary School			High School				Undergraduate College/University				Graduate / Professional				
School Name and Location																	
Years Completed	4	5 □	6 □	7	8	9	10 □		12 □		2	3	4			3	4
Diploma / Degree																	
Describe Course of Study																	
Describe any specialized train apprenticeship, skills and extr curricular activities																	
Describe any honors you have received																	
State any additional informat you feel may be helpful to us considering your application	in																

	Indicate any foreign l	anguages you can speak, read and / or write	
	Fluent	Good	Fair
Speak			
Read			
Write			

**List professional, trade, business or civic activities and offices held.** You may exclude membership which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:

## **Employment Experience**

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

	Employer			PLO YED	Work Performed		
1.			From	То	work Performed		
	Address						
	Telephone		HOURLY RAT	TE / SALARY			
			Starting	Final			
	Job Title	Supervisor					
	Reason for Leaving	I					
	Employer		DATE EM	PLOYED			
2.	1.121		From	То	Work Performed		
	Address						
	Telephone		HOURLY RAT	TE / SALARY			
			Starting	Final			
	Job Title	Supervisor					
	Reason for Leaving						
	Employer		DATE EM	PLOYED	Work Performed		
3.			From	То	work Performed		
	Address						
	Telephone		HOURLY RAT	TE / SALARY			
			Starting	Final			
	Job Title	Supervisor					
	Reason for Leaving						
	Employer		DATE EM	PLOYED	Work Donformed		
4.			DATE EM From	IPLOYED To	Work Performed		
4.	Employer Address				Work Performed		
4.	Address		From	То	Work Performed		
4.				То	Work Performed		
4.	Address	Supervisor	From HOURLY RAT	To TE / SALARY	Work Performed		
4.	Address Telephone	Supervisor	From HOURLY RAT	To TE / SALARY	Work Performed		

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

### **Applicant's Statement**

1

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby understand and acknowledge that, unless otherwise define by applicable law, any 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" employement relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employement, 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.

Date

Signature of Applicant

**REFERENCE** Give name, address and telephone number of three references who are not related to you and are not previous employers.

1.
2.
3
Have you ever had any job-related training in the United States military?
If Yes, please describe
Are you physically or otherwise unable to perform the duties of the job for which you are applying?
Special Skills and Qualifications

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