



For Office Use Only

**Position Applied For:**

**Salary Desired:**

## EMPLOYMENT APPLICATION

The City of Wildomar is an equal opportunity employer. All qualified applicants will be considered without regard to age, race, color, creed, national origin or ancestry, sex (gender, gender identity, gender expression), religion, marital status, registered domestic partner status, physical or mental disability, medical condition including genetic characteristics, reproductive health choices, veteran status, or any other consideration prohibited by federal, state or local laws. This application must be completed even if you attach a resume.

## PERSONAL INFORMATION

|   |  |  |                           |  |  |                                 |  |  |
|---|--|--|---------------------------|--|--|---------------------------------|--|--|
|   |  |  |                           |  |  |                                 |  |  |
| <b>(Last Name)</b>  |  |  | <b>(First Name)</b>       |  |  | <b>(Initial)</b>                |  |  |
|   |  |  |                           |  |  |                                 |  |  |
| <b>(Other Names Used)</b>   |  |  |                           |  |  |                                 |  |  |
|   |  |  |                           |  |  |                                 |  |  |
| <b>(Home Phone)</b>   |  |  | <b>(Cell Phone)</b>       |  |  | <b>(Email)</b>                  |  |  |
|   |  |  |                           |  |  |                                 |  |  |
| <b>(Address)</b>  |  |  | <b>(City, State, Zip)</b> |  |  |                                 |  |  |
|   |  |  |                           |  |  |                                 |  |  |
| <b>(Mailing Address)</b>  |  |  | <b>(City, State, Zip)</b> |  |  |                                 |  |  |
| <i>If <u>driving</u> is a required function of the job for which you are applying, provide driver's license number and state of issuance below:</i> |  |  |                           |  |  |                                 |  |  |
| <b>State of Issuance:</b>   |  |  |                           |  |  | <b>License Number:</b>          |  |  |
|   |  |  |                           |  |  |                                 |  |  |
| Have you ever interviewed with the City of Wildomar?  |  |  |                           |  |  | If Yes, list date of interview  |  |  |
| Have you ever been employed by the City of Wildomar?  |  |  |                           |  |  | If Yes, list date of employment |  |  |
| Do you have any family members employed by the City of Wildomar?  |  |  |                           |  |  | If Yes, list date of employment |  |  |
| Are you at least 18 years of age? <b>Yes</b> <b>No</b>  |  |  |                           |  |  |                                 |  |  |
| If hired, can you provide proof of your legal right to work in the USA? <b>Yes</b> <b>No</b>  |  |  |                           |  |  |                                 |  |  |

## EDUCATION

|                             | School | City/State | Major/Minor | Years Completed | Degree, Diploma or Certificate |
|-----------------------------|--------|------------|-------------|-----------------|--------------------------------|
| High School                 |        |            |             |                 |                                |
| College or University       |        |            |             |                 |                                |
| Vocational, Business, Other |        |            |             |                 |                                |

**List any professional designations:**

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**Other Special knowledge, skills or qualifications:**

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**Computer Skills: (Circle those that apply)**

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|-----------------|-----------------|----------------------|------------------|
| <u>MS Word:</u> | <u>MS Excel</u> | <u>MS PowerPoint</u> | <u>MS Access</u> |
|                 |                 |                      |                  |

**Other computer skills or knowledge:**

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## EMPLOYMENT HISTORY

List below all present and past employment starting with your most recent employer (*a ten year history is sufficient*). Attach as many pages as necessary.

*You must complete this section even if attaching a resume.*

|                     |                   |                      |   |
|---------------------|-------------------|----------------------|---|
| Employer:           | Employer Address: | Dates of Employment: | Immediate Supervisor:   |
|                     |                   | --                   |   |
|                     |                   |                      | May we contact? <input type="checkbox"/> Y <input type="checkbox"/> N |
| Starting Job Title: |                   | Ending Job Title:    |   |
|                     |                   |                      |   |

Job Duties:

|                     |                   |                      |   |
|---------------------|-------------------|----------------------|---|
| Employer:           | Employer Address: | Dates of Employment: | Immediate Supervisor:   |
|                     |                   | --                   |   |
|                     |                   |                      | May we contact? <input type="checkbox"/> Y <input type="checkbox"/> N |
| Starting Job Title: |                   | Ending Job Title:    |   |
|                     |                   |                      |   |

Job Duties:

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|-----------|-------------------|----------------------|-------------------------|
| Employer: | Employer Address: | Dates of Employment: | Immediate Supervisor:   |
|           |                   | --                   |                         |
|           |                   |                      | May we contact?   Y   N |

|                     |                   |
|---------------------|-------------------|
| Starting Job Title: | Ending Job Title: |
|                     |                   |

Job Duties:

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|-----------|-------------------|----------------------|-------------------------|
| Employer: | Employer Address: | Dates of Employment: | Immediate Supervisor:   |
|           |                   | --                   |                         |
|           |                   |                      | May we contact?   Y   N |

|                     |                   |
|---------------------|-------------------|
| Starting Job Title: | Ending Job Title: |
|                     |                   |

Job Duties:

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|---------------------|-------------------|---|-----------------------|
| Employer:           | Employer Address: | Dates of Employment:  | Immediate Supervisor: |
|                     |                   | --  |                       |
|                     |                   | May we contact? <input type="checkbox"/> Y <input type="checkbox"/> N |                       |
| Starting Job Title: |                   | Ending Job Title:   |                       |
|                     |                   |   |                       |

Job Duties:

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|---------------------|-------------------|---|-----------------------|
| Employer:           | Employer Address: | Dates of Employment:  | Immediate Supervisor: |
|                     |                   | --  |                       |
|                     |                   | May we contact? <input type="checkbox"/> Y <input type="checkbox"/> N |                       |
| Starting Job Title: |                   | Ending Job Title:   |                       |
|                     |                   |   |                       |

Job Duties:

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## CERTIFICATION AND AUTHORIZATION

*Please read carefully, initial each paragraph and sign below.*

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be ground for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials: \_\_\_\_\_

I hereby authorize the city to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the city any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the City of Wildomar, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising from or in any way related to such investigation or disclosure.

Initials: \_\_\_\_\_

I understand that nothing contained in the application, or conveyed during any interview, which may be granted, or during my employment, if hired, is intended to create an employment contract between the city and me. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice of cause, at the option of either myself or the city and that no promises or representations contrary to the foregoing are binding to the city unless made in writing and signed by me and the company's designated representative.

Initials: \_\_\_\_\_

I understand that any offer of employment I receive is subject to successful completion of a background check, but that such a background check will only be conducted following a conditional offer of employment.

Initials: \_\_\_\_\_

*I certify that I have read, fully understand and accept all terms of foregoing certification and authorization.*

**Applicant's Signature:**

**Date:**