

# Application for Employment

PLEASE PRINT

## City of Carmel-By-The-Sea

Post Office Box CC  
Carmel, California 93921  
(831) 620-2000



Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Personnel Office.

Position applied for \_\_\_\_\_ Date of application \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Referral Source  Advertisement  Employee  Relative  Government Employment Agency  
 Walk-in  Private Employment Agency  Other  
Name of source (if applicable) \_\_\_\_\_

Name \_\_\_\_\_  
LAST FIRST MIDDLE

Address \_\_\_\_\_ Social Security # \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Telephone # ( ) \_\_\_\_\_ Mobile/Beeper/Other Phone # ( ) \_\_\_\_\_ E-mail Address \_\_\_\_\_

If necessary, best time to call you at home is \_\_\_\_\_ : \_\_\_\_\_  
AM PM

May we contact you at work? \_\_\_\_\_  Yes  No

If yes, work number and best time to call \_\_\_\_\_ ( ) \_\_\_\_\_ : \_\_\_\_\_  
AM PM

If you are under 18 and it is required, can you furnish a work permit? \_\_\_\_\_  Yes  No

If no, please explain \_\_\_\_\_

Have you submitted an application here before? \_\_\_\_\_  Yes  No

If yes, give date(s) and position(s) \_\_\_\_\_ / /

Have you ever been employed here before? \_\_\_\_\_  Yes  No

If yes, give date(s) \_\_\_\_\_ From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Can you, after employment, show proof that you are legally eligible for employment in this country? \_\_\_\_\_  Yes  No

Date available for work \_\_\_\_\_ / /

Type of employment desired:  Full-Time  Part-Time  Temporary  Seasonal  Other

Will you relocate if job requires it? \_\_\_\_\_  Yes  No Will you travel if job requires it? \_\_\_\_\_  Yes  No

Are you able to meet the attendance requirements of the position? \_\_\_\_\_  Yes  No

Will you work overtime if required? \_\_\_\_\_  Yes  No

If no, please explain \_\_\_\_\_

Have you ever been bonded? \_\_\_\_\_  Yes  No

Have you ever been convicted of a felony or a serious misdemeanor? \_\_\_\_\_  Yes  No

If yes, please provide date(s) and details \_\_\_\_\_

Police Officer Applicants Only: Have you ever been arrested? \_\_\_\_\_  Yes  No

If yes, please provide date(s) and details \_\_\_\_\_

ANSWERING "YES" TO THESE QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT. FACTORS SUCH AS DATE OF THE OFFENSE, SERIOUSNESS AND NATURE OF THE VIOLATION, REHABILITATION AND POSITION APPLIED FOR WILL BE TAKEN INTO ACCOUNT.

Driver's license number if driving is an essential job function \_\_\_\_\_ State \_\_\_\_\_

**EMPLOYMENT HISTORY**

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

EMPLOYER	TELEPHONE# ( )	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		FROM	TO	
STARTING JOB TITLE/FINAL JOB TITLE		HOURLY RATE/SALARY		
IMMEDIATE SUPERVISOR AND TITLE		STARTING		
REASON FOR LEAVING		\$	PER	
MAY WE CONTACT FOR REFERENCES? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		HOURLY RATE/SALARY		
		FINAL		
		\$	PER	

  

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		FINAL		
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		FINAL		
		\$	PER	

COMMENTS INCLUDING EXPLANATION OF ANY GAPS IN EMPLOYMENT \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Skills and Qualifications**

Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

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

<b>Educational Background</b>	<b>(if job related)</b>
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A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank. E. Major field of study. F. Minor field of study (if applicable).

A. SCHOOL	B. NUMBER OF YEARS COMPLETED	C. DEGREE DIPLOMA	D. GPA CLASS RANK	E. MAJOR	F. MINOR

<b>References</b>
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List name and telephone number of three business/work references who are NOT related to you and are NOT previous supervisors. If not applicable, list three school or personal references who are not related to you.

NAME	TELEPHONE	NUMBER OF YEARS KNOWN
	(   )	
	(   )	
	(   )	

<b>Additional Information</b>
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List professional, trade, business or civic associations and any office held.  
EXCLUDE MEMBERSHIPS THAT WOULD REVEAL RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, CITIZENSHIP, AGE, MENTAL OR PHYSICAL DISABILITIES, VETERAN/RESERVE, NATIONAL GUARD OR ANY OTHER SIMILARLY PROTECTED STATUS.

ORGANIZATION	OFFICES HELD

List special accomplishments, publications, awards, etc.  
EXCLUDE MEMBERSHIPS THAT WOULD REVEAL RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, CITIZENSHIP, AGE, MENTAL OR PHYSICAL DISABILITIES, VETERAN/RESERVE, NATIONAL GUARD OR ANY OTHER SIMILARLY PROTECTED STATUS.

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List any additional information you would like us to consider. \_\_\_\_\_

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**Applicant Statement (Please Read Carefully, Initial Each Paragraph and Sign below)**

\_\_\_\_\_  
Initial I certify that all information I have provided in order to apply for and secure work with the City is true, complete and correct.

\_\_\_\_\_  
Initial I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the City's service, whenever it is discovered.

\_\_\_\_\_  
Initial I expressly authorize, without reservation, the City, its representatives, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the City, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

\_\_\_\_\_  
Initial I understand that the City does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

\_\_\_\_\_  
Initial I understand that this application remains current for only 180 days. At the conclusion of that time, if I have not heard from the City and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

\_\_\_\_\_  
Initial If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the City reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration.

\_\_\_\_\_  
Initial I understand that no representative of the City, other than an authorized officer, has the authority to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the City Administrator or his authorized representative.

\_\_\_\_\_  
Initial I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

\_\_\_\_\_  
Initial I understand that if I am offered employment, said offer is contingent upon successful completion of a job related physical examination and background check to include fingerprints.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

