

APPLICATION FOR EMPLOYMENT

King City Police Department
415 Bassett St.
King City, CA 93930

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

Position(s) Applied For	Date of Application
How Did You Learn About Us?	
Advertisement	Relative
Employment Agency	Friend
	Inquiry
	Other _____

Last Name	First Name	Middle Name
Address		
<i>Number & Street</i>	<i>City</i>	<i>State</i>
		<i>Zip Code</i>
Telephone Number(s)		Social Security Number (Voluntary)

Best time to contact you at home is: :

If you are under 18 years of age, can you provide required proof of your eligibility to work?..... Yes No

Have you ever filed an application with us before?..... Yes No

If Yes, give date: / /

Have you ever been employed with us before?..... Yes No

If Yes, give date: / /

Do any of your friends or relatives, other than your spouse, work here?..... Yes No

Are you currently employed?..... Yes No

May we contact your present employer?..... Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? (*Proof of citizenship or immigration status will be required upon employment.*)..... Yes No

Date available for work: / / What is your desired salary range?

Are you available to work: Full-Time (Please indicate 1 2 3 shift)

Part-Time (Please indicate Mornings Afternoon Evenings)

Temporary (Please indicate dates available / / - / /)

Are you currently on "lay-off" status and subject to recall?..... Yes No

Can you travel if a job requires it?..... Yes No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

	Name and Address of School	Course of Study	Number of Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any Specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

EMPLOYMENT EXPERIENCE

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

1.	Employer	Dates Employed		Work Performed
		<i>From</i>	<i>To</i>	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		<i>Starting</i>	<i>Final</i>	
Job Title	Supervisor			
Reason for Leaving				

2.	Employer	Dates Employed		Work Performed
		<i>From</i>	<i>To</i>	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		<i>Starting</i>	<i>Final</i>	
Job Title	Supervisor			
Reason for Leaving				

3.	Employer	Dates Employed		Work Performed
		<i>From</i>	<i>To</i>	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		<i>Starting</i>	<i>Final</i>	
Job Title	Supervisor			
Reason for Leaving				

4.	Employer	Dates Employed		Work Performed
		<i>From</i>	<i>To</i>	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		<i>Starting</i>	<i>Final</i>	
Job Title	Supervisor			
Reason for Leaving				

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

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

ADDITIONAL INFORMATION

OTHER QUALIFICATIONS

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

C.A. Post Academy Graduate: Yes No

If yes, please list P.O.S.T. Academy you graduated from and your dates of attendance:

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SPECIALIZED SKILLS

(Check skills and list equipment that you have operated.)

Production/Mobile
Machinery (list)

Other (list)

Terminal	Spreadsheet
PC/MAC	Word Processing
Typewriter	Shorthand
WPM _____	WPM _____

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING

Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accomodation? Yes No

REFERENCES

1. Name _____ Phone _____
Address _____
2. Name _____ Phone _____
Address _____
3. Name _____ Phone _____
Address _____

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined 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.

In the event of employment, 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.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks

Employed Yes No Date of Employment

Job Title Hourly Rate/Salary Department

By

Name and Title

Date