

PAJARO/SUNNY MESA COMMUNITY SERVICES DISTRICT

136 San Juan Road
Royal Oaks, CA 95076
(831) 722-1389 • (831) 663-2181 • Fax (831) 722-2137
WWW.PAJAROSUNNYMESA.COM

For Personnel Use Only:	
DATE RECEIVED _____	BY: _____
1 ST SCREEN DATE _____	
1 ST INTERVIEW DATE _____	
FINAL INTERVIEW DATE _____	
HIRE DATE _____	

Application for Employment

Position(s) applied for _____ Date of application ____/____/____

Name _____
Last
First
Middle

Address _____
Street
City
State
Zip Code

Telephone # (____) _____ Cellular/Other # (____) _____ E-mail Address _____

Referral Source (How did you hear about us?) _____

Do you have a valid California Driver's License? Number _____ Class _____

Foreign Languages: Speak _____ Read/Write _____

If you are under 18 and it is required, can you furnish a work permit?..... Yes No
 If no, please explain: _____

Are you legally eligible for employment in this country? Yes No

Do you have any physical limitations which would prevent you from performing the essential functions of the position, with or without reasonable accommodations? Yes No

Relatives of persons currently employed by PSMCSD may be hired only if they will not be working directly for or supervising a relative. Are you related to any present employees of PSMCSD? Yes No
 If yes, please list the name and relationship _____

Have you ever applied here before? If yes, please give dates and position (s): Yes No _____

Date available for work ____/____/____ What is your desired salary range? _____
Full Time Yes No Part Time Yes No Temporary Yes No

Employment History

Starting with your most recent employer, provide the following information.

From: Mo.____/Yr.____	Full Time <input type="checkbox"/>	Employer's Name _____
To: Mo.____/Yr.____	Part Time <input type="checkbox"/>	Address _____ City _____
Hrs. Per Week _____		Supervisor's Name/Phone _____
Position Title _____ Duties _____		
Number of Employees Supervised _____ Reason for leaving _____		

From: Mo.____/Yr.____	Full Time <input type="checkbox"/>	Employer's Name _____
To: Mo.____/Yr.____	Part Time <input type="checkbox"/>	Address _____ City _____
Hrs. Per Week _____		Supervisor's Name/Phone _____
Position Title _____ Duties _____		
Number of Employees Supervised _____ Reason for leaving _____		

From: Mo. _____/Yr. _____

Full Time

Employer's Name _____

To: Mo. _____/Yr. _____

Part Time

Address _____ City _____

Hrs. Per Week _____

Supervisor's Name/Phone _____

Position Title _____ Duties _____

Number of Employees Supervised _____ Reason for leaving _____

Skills

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying:

Your Clerical Skills: Typing _____ N.W.P.M. Calculator: Yes No Computer: Yes No

List Software Programs Used: _____

Other (specify): _____

Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	# of Years Completed	Completed	GPA	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____		

References

Name	Title	Telephone	E-mail	# of Years Known
		()		
		()		
		()		

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or 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. I understand that no supervisor or representative of the employer is authorized 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 employer's president.

This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, genetic information, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, genetic information, citizenship, age, disability, or any other protected status. The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

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 eliminate me from further consideration for employment, may result in my immediate discharge from the employer's service, whenever it is discovered.

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 FORGOING Applicant Statement.

Signature of Applicant _____ Date ____/____/____