

3231 MAIN STREET
 OAKLEY, CA 94561
 (925) 625-7000
 www.ci.oakley.ca.us

EMPLOYMENT APPLICATION

An Equal Opportunity Employer

Please complete this application accurately. It is part of the examination process

POSITION APPLYING FOR:

Name: _____

Last	First	Middle
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Address: _____

Home Phone: () _____

Work Phone: () _____

Message Phone: () _____

E-Mail Address _____

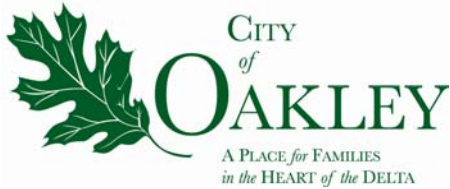
IMMIGRATION REFORM & CONTROL ACT: After employment, you will be required to submit verification of your legal right to work in the United States.

CALIFORNIA DRIVERS LICENSE: If a driver's license is required to perform the job for which you are applying (see Job Announcement), do you have the necessary driver's license? (You may be required to produce proof of a current license). Yes No

If YES, License No. _____ Class _____ Expiration Date: _____

Have you ever been convicted of any offense(s) other than a driving violation? (Exclude juvenile offenses if records legally sealed). If yes, list offense(s) and date(s) of conviction in "Comments" section. A yes answer is not necessarily disqualifying.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of reckless driving or driving under the influence of alcohol or other drugs OR has your driver's license ever been suspended or revoked as a result of conviction(s) of driving violation(s): List offense(s) and date(s) of conviction(s) in the "Comments" section. A yes answer is not necessarily disqualifying.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were you ever discharged from employment or forced to resign from employment because of misconduct or unsatisfactory services? If yes, explain in "Comments" section. A yes answer is not necessarily disqualifying	<input type="checkbox"/> Yes <input type="checkbox"/> No
May we contact the employers you have listed? If not, please state which one(s) and reason in "Comment" section.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you now or have you ever been employed by the City of Oakley?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Veteran's Preference: Do you wish to claim Veteran's Preference? If applicable? To be considered, you must submit a copy of your discharge papers (DD214)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a relative of a City of Oakley employee? If so, please provide employee's name and department in the "Comments" section below.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Comments:



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EDUCATION, TRAINING, AND EXPERIENCE
Describe fully any business, trade, or other education (verification of education may be requested)

Circle Highest Grade Completed	Name of School	Location (City, State)	Graduate
9 10 11 12			<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If No, do you have a G.E.D., California High School Proficiency Certificate or equivalent? <input type="checkbox"/> Yes <input type="checkbox"/> No</i>			

College, Business or Trade School Attended	Dates	Degree	Major Subjects	No. of Units Completed

Describe fully any job-related skills, knowledge, special training, certificates or licenses you may possess which are relevant to the position applied for. (Attach additional sheets as necessary).

EXPERIENCE

List your most recent employment or related volunteer experience first and account for all time periods during the last 10 years. Be sure to list each change in title or promotion separately. If you wish to elaborate on your experience, **a supplemental sheet or resume may be attached, but a resume will not substitute for the information required in this section.**

Resume/Supplements attached: Yes No

FROM (MO/YR)	TO (MO/YR)	EMPLOYER	TITLE
TOTAL TIME:		ADDRESS:	
HOURS PER WEEK:		DUTIES:	
FINAL SALARY:			
NAME OF SUPERVISOR AND PHONE NO.			NO. EMPLOYEES SUPERVISED
REASON FOR LEAVING OR SEEKING A JOB CHANGE AT THIS TIME:			



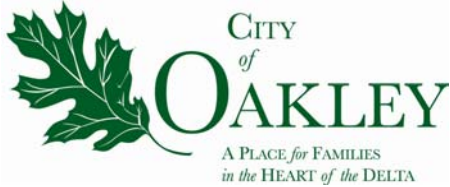
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EXPERIENCE (CONTINUED FROM PREVIOUS PAGE)

FROM (MO/YR)	TO (MO/YR)	EMPLOYER	TITLE
TOTAL TIME:		ADDRESS:	
HOURS PER WEEK:		DUTIES:	
FINAL SALARY:			
NAME OF SUPERVISOR AND PHONE NO.			NO. EMPLOYEES SUPERVISED
REASON FOR LEAVING OR SEEKING A JOB CHANGE AT THIS TIME:			

FROM (MO/YR)	TO (MO/YR)	EMPLOYER	TITLE
TOTAL TIME:		ADDRESS:	
HOURS PER WEEK:		DUTIES:	
FINAL SALARY:			
NAME OF SUPERVISOR AND PHONE NO.			NO. EMPLOYEES SUPERVISED
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REMARKS: (Attach additional sheets as necessary)

References: Please list three references, other than relatives and previous employers that we may contact

Name	Address	Telephone Number
1.		
2.		
3.		

CERTIFICATION (IMPORTANT) – PLEASE READ BEFORE SIGNING

I hereby certify that all statements made on or in connection with this application are true and I understand and agree that any misstatements or omissions of material facts may cause forfeiture of my eligibility for employment by the City of Oakley. I further agree to be fingerprinted for the purposes of a criminal record check, which may be a part of the application process, and to submit to a complete medical examination to ascertain my fitness for duty by a City physician upon a job offer. I agree to furnish such proof of age, education, and legal right to work in the United States, as may be directed as conditions of employment upon job offer or hire. I further understand that any or all information included on this application or its attachments are subject to verification by the City of Oakley.

APPLICANTS SIGNATURE:	DATE:
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The City of Oakley is an equal opportunity employer. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.



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EQUAL EMPLOYMENT OPPORTUNITY SURVEY

APPLICANT: Please complete this form and submit it with your application. The completed form is confidential and will be separated from your application. This information is voluntary and is gathered in accordance with State and Federal laws for the purpose of evaluating the effectiveness of our Equal Employment Opportunity policy and recruitment efforts.

Title of position you are applying for: _____

Reasonable accommodation requests may be made at any stage of the recruitment and selection process. If you require reasonable accommodation, please contact the Human Resources office to request such accommodation.

How did you learn of this recruitment? (Please check only one)

<input type="checkbox"/>	City of Oakley employee
<input type="checkbox"/>	City of Oakley website
<input type="checkbox"/>	Job Bulletin Board
<input type="checkbox"/>	Friend/Relative
<input type="checkbox"/>	Walk-in
<input type="checkbox"/>	Internet (specify website)
<input type="checkbox"/>	An Organization or Group, specify
<input type="checkbox"/>	Newspaper, Publication (specify which one)
<input type="checkbox"/>	Other

A. Please indicate gender Male Female

B. Are you age 40 or above ? Yes No

C. Please indicate ethnic origin (check one)

- White (not of Hispanic origin): All persons having origins in any of the peoples of Europe, North Africa, or the Middle East
- Black (not of Hispanic origin): All persons having origins in any of the black racial groups of Africa
- Hispanic: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin regardless of race
- Asian or Pacific Islander: All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes for example, China, India, Japan, Korea, the Philippines, and Samoa
- American Indian or Alaskan Native: All persons having origins in any of the original peoples of North American, and who maintain cultural identification through tribal affiliation or community recognition.