



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

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

Select the 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:
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 for references.

Name	Relationship to Applicant	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 if required for the position I am applying for. 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.