



Employment Application

APPLICANT INFORMATION			
Last Name		First	M.I. Date
Street Address			Apartment/Unit #
City		State	ZIP
Phone		E-mail Address	
Date Available		Position Applying for	
Do you have a relative working for the City of King City?			YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you a citizen of the United States?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for King City in the past?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I authorize this employer, City of King City, to make any necessary and appropriate investigations to verify the information contained herein, including calling my former or present employer.

Signature	Date
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APPLICANT: Please complete this form for statistical purposes and submit it with your application. Information on this form will be kept separate from your application and WILL NOT be used to make any employment decision which affects you.

Position Applied For: _____ Birth Date: _____

Sex: Male _____ Female _____

- A. _____ White (not of Hispanic origin): All persons having origins in any of the original peoples of Europe, North Africa, the Middle East or the Indian subcontinent.
- B. _____ Black (not of Hispanic origin): All persons having origins in any of the black racial groups.
- C. _____ Hispanic: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other or other Spanish Culture or origin, regardless to race.
- D. _____ Asian or Pacific Islander: Persons having the origins in any of the original peoples of the Far East, Southeast Asia, of the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.
- E. _____ American Indian or Alaskan Native: All persons having origins in any of the original peoples of North America.

Handicapped: Do you consider yourself mentally or physically disabled under the Vocational Rehabilitation Act of 1973? _____ Yes _____ No

How did you hear of this job vacancy? _____