



Human Resources Division  
1600 Huntington Drive  
Duarte, CA 91010  
(626) 357-7931 Phone  
(626) 358-0018 Fax

## APPLICATION FOR EMPLOYMENT

**Instructions:** Please print or type all responses, except your signature and initials. Please fill out ALL items completely and accurately. **Do not write "See Resume."** Only fully completed and signed applications will be considered. All statements are subject to verification; an incorrect statement may bar you from employment. Note: Information submitted on this application will only be considered current for the recruitment of the position that you are applying for; consideration for other positions will require a new application.

Title of Position Applying For: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Number & Street City State Zip Code

Phone: \_\_\_\_\_  
Home Mobile Other (specify)

Email: \_\_\_\_\_

### EDUCATION AND TRAINING

List all educational institutions you have attended.

Name & City/State of High School, College, University, Business, Technical, and/or Other Schools	Major Course of Study	Type of Degree Pursued	Degree Received (Y/N)	If no degree, list number of years attended

Describe any specialized training, skills, volunteer activities, certificates, licenses, and/or registrations you possess that might be pertinent to this position. *(Please omit any information that might disclose your race, sex, national origin, age, disability, sexual orientation, marital status, or religion.)*

## EMPLOYMENT EXPERIENCE

List all jobs you have had within the last ten years, beginning with your current or most recent position. **Do not write "See Resume."** A resume will not substitute for the information required in this section. If more space is required, you may attach additional sheets.

Job Title:		Dates Employed:	
Employer:		Supervisor:	
Address:		Supervisor's Title:	
		Supervisor's Phone:	
Last Salary:		Reason for Leaving:	
Job Responsibilities:			
Job Title:		Dates Employed:	
Employer:		Supervisor:	
Address:		Supervisor's Title:	
		Supervisor's Phone:	
Last Salary:		Reason for Leaving:	
Job Responsibilities:			
Job Title:		Dates Employed:	
Employer:		Supervisor:	
Address:		Supervisor's Title:	
		Supervisor's Phone:	
Last Salary:		Reason for Leaving:	
Job Responsibilities:			
Job Title:		Dates Employed:	
Employer:		Supervisor:	
Address:		Supervisor's Title:	
		Supervisor's Phone:	
Last Salary:		Reason for Leaving:	
Job Responsibilities:			

## CERTIFICATIONS

Please check the applicable box.

If hired, can you provide proof of authorization to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Based upon the job description, can you perform the essential functions of the position, with or without reasonable accommodations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
May we contact your employers? <i>If not, please explain:</i> _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been employed by the City of Duarte?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any relatives employed by the City of Duarte? <i>If yes, please state names:</i> _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Under your name or another name, have you ever been convicted of or plead "nolo contendere" to any felony or misdemeanor, other than a routine traffic violation? <i>If yes, please give conviction date and the crime for which you were convicted:</i> _____  Note: Convictions are not automatic disqualifications for employment. Please include convictions for which the criminal record has been expunged, sealed, or eradicated by the court, or misdemeanor convictions for which any probation has been completed and the case dismissed by the court. Please do <b>not</b> identify convictions for marijuana-related offenses that are more than two years old. Finally, do <b>not</b> indicate if you are currently in a drug-diversion program ordered by the court.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you presently out on bail or on your own recognizance pending trial for the alleged commission of any crime? <i>If yes, please explain:</i> _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please read the following statements carefully and initial your acceptance next to each paragraph.

I declare under penalty of perjury that the facts contained in this application are true and complete to the best of my knowledge. I understand that any false information or omissions will disqualify me from further consideration for employment and will be justification for my dismissal from employment, if discovered at a later date.	_____
I agree to immediately notify the City if I should be arrested for and/or convicted of any crime while my job application is pending or during my period of employment, if hired.	_____
I authorize the investigation of all statements contained in this application (and accompanying resumé, if any). I further authorize any person, school, current employer (except as expressly noted), past employer(s), and organizations to give you and/or an outside agency any and all information they may have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing information and opinion to you.	_____
I understand that, if hired, I may not hold other employment or engage in other activities that create a conflict of interest with my position with the City, unless given permission in writing by the City.	_____
If I become employed, in consideration of my employment, I agree to conform to the rules and regulations of the City.	_____

Signature

Date