



City of Rio Dell Employment Application

675 Wildwood Avenue, Rio Dell, CA 95562
 Phone: (707) 764-3532 Fax: (707) 764-5480
<http://riodellcity.com/employment.shtml>

The City of Rio Dell is an Equal Opportunity Employer

Complete this application in its entirety. The City will only consider information contained on the application or supplemental materials specifically requested for this recruitment to determine your qualifications for the position in which you are applying. Incomplete or illegible applications may be disqualified. Documents submitted will not be returned. Resumes are not accepted in lieu of a completed application form.

For Office Use Only

Time Rec'd: _____
 Date / / _____
 Accepted: _____
 Date Notice Mailed / / _____
 Rejected: _____
 Date Notice Mailed / / _____
 Experience
 Education
 Other _____
 How did you Learn of the Position?
 Newspaper
 Personal Inquiry at City Hall
 Website
 Other _____

POSITION APPLIED FOR: _____ Full-Time Part-Time

Last Name _____ First Name _____ Middle Initial _____ Other names under which you have worked: _____

Address _____ Telephone Number (home) _____ Telephone Number (day) _____

City, State, Zip _____ Email _____

EDUCATION

Have you completed 8th grade? Yes No Do you have a High School diploma or equivalent (GED or CA Proficiency)? Yes No

Colleges, Universities (Name and Location)	Major	Total Units Earned		Degree Received (AA, BA, BS, MA, etc.)
		Semester	Quarter	

Licenses or Certificates which are related to the position for which you are applying for: _____

List professional, trade, business, or civic activities and offices held which are related to the position for which you are applying for: _____

Do you have a valid California Driver's License? Yes No Class _____ License Number _____

Restrictions (other than eyeglasses): _____

If no California Driver's License, do you have one from another state in the US? Yes No
 State _____ Class _____ License Number _____

EMPLOYMENT HISTORY

Begin with your most recent experience. List experience gained in the last ten years, including periods of self-employment and military service. DO NOT omit any employers during the last 10 years. Include full details about experience that, in your opinion, makes you qualified for the job for which you are applying. **resume will not, nor will reference to a resume, be accepted in lieu of providing complete information on a City application.**

Dates of employment	Title of your position	Salary	<input type="checkbox"/> Full-time
From: _____ (month) _____ (year) To: _____ (month) _____ (year)	Type of business or organization	Beginning: _____ Ending: _____	<input type="checkbox"/> Part-time Hours/Week _____
Name and Address (include city, state, ZIP) of Current or Most Recent Employer		Name/Title of your immediate supervisor	
Description of Duties, Responsibilities, and Accomplishments		Supervisor Phone: _____ May we contact her/him? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for Leaving: _____			

Dates of employment From: _____(month) _____(year) To: _____(month) _____(year)	Title of your position Type of business or organization	Salary Beginning: Ending:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Hours/Week _____	
Name and Address (include city, state, ZIP) of Current or Most Recent Employer		Name/Title of your immediate supervisor Supervisor Phone: _____ May we contact her/him? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Description of Duties, Responsibilities, and Accomplishments				
Reason for Leaving				
Dates of employment From: _____(month) _____(year) To: _____(month) _____(year)	Title of your position Type of business or organization	Salary Beginning: Ending:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Hours/Week _____	
Name and Address (include city, state, ZIP) of Current or Most Recent Employer		Name/Title of your immediate supervisor Supervisor Phone: _____ May we contact her/him? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Description of Duties, Responsibilities, and Accomplishments				
Reason for Leaving				
Dates of employment From: _____(month) _____(year) To: _____(month) _____(year)	Title of your position Type of business or organization	Salary Beginning: Ending:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Hours/Week _____	
Name and Address (include city, state, ZIP) of Current or Most Recent Employer		Name/Title of your immediate supervisor Supervisor Phone: _____ May we contact her/him? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Description of Duties, Responsibilities, and Accomplishments				
Reason for Leaving				
Have you ever been terminated or asked to resign from a position? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give details.				
Have you ever been convicted of a felony or misdemeanor in violation of any law, regulation, or ordinance? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide court information and circumstances below. Conviction is not an automatic disqualification from employment. Each case is considered individually; however, failure to list a conviction is cause for automatic ineligibility for hire or dismissal. It is City policy to obtain and review conviction records. You may omit any traffic offense, which was an infraction and resulted in a fine of less than \$400. You may also omit any conviction for marijuana-related offenses that are beyond two years in age.				
Do you have any relatives employed by the City of Rio Dell? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please identify first and last name, department and title, and relationship.				
First Name	Last Name	Department	Title	Relationship

CERTIFICATION OF APPLICANT (READ CAREFULLY BEFORE SIGNING)

I hereby certify that that the information provided in my resume, all statements made in this application, and all statements made during the interview process are true and correct to the best of my knowledge. I agree and understand that any misstatement, falsification, or omission of material facts will cause forfeiture of my eligibility for employment. I also understand that falsification or omission of information regarding convictions will result in my removal from eligible lists or dismissal from City of Rio Dell employment. I understand that I give the right to the City of Rio Dell to check any information regarding my employment application.

Signature of Applicant: _____ Date: _____