



# APPLICATION FOR EMPLOYMENT

For information call: (559) 924-6700

Submit To: Personnel, City Hall, 119 Fox Street, Lemoore, CA, 93245

Type or print legibly. Answer all questions completely. A resume will not be accepted in the place of a completed application.

Applying for position of: \_\_\_\_\_

Name: \_\_\_\_\_ Other Names Used: \_\_\_\_\_  
Last, First Middle

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

Telephone: Day ( ) \_\_\_\_\_ Message ( ) \_\_\_\_\_ SSN: \_\_\_\_\_

If required for the position: CA Drivers License: \_\_\_\_\_ Class: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Are you available to work: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Day \_\_\_\_\_ Evening \_\_\_\_\_ On-call \_\_\_\_\_ Weekends \_\_\_\_\_

Are you over 18 years of age? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you previously applied to the City of Lemoore? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any relatives currently employed by the City? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a crime? (Please exclude minor traffic violations and misdemeanor marijuana convictions over two years old.) Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been fired or forced to resign from a position? Yes \_\_\_\_\_ No \_\_\_\_\_

If the answer to any question above was yes please explain below:

## EDUCATION/TRAINING:

Circle Highest Grade Completed: 9 10 11 12 13 14 15 16 17 18 19 GED Proficiency Certificate

### Technical Schools, Colleges, Universities Attended:

List Name of School, City and State	Semester/Quarter		Major	Degree/Year
	Units Completed			

### Do you hold any certificates or licenses related to this position:

Circle: Water Operator Grade: 1 2 3 Wastewater Operator Grade: 1 2 3 POST: Levels: 3 2 1 - Basic - Supervisory Other:

If required for the position, what is your typing speed: \_\_\_\_\_ wpm

Do you read, speak, or write any other language than English? \_\_\_\_\_

**EMPLOYMENT HISTORY:**

List all related job experience for the past 10 years, including volunteer and military experience. Use a separate block for each job title. When additional space is needed, copy this side of the application and attach. **Resumes may NOT be substituted for this section.**

**Title:** \_\_\_\_\_ **Employer:** \_\_\_\_\_  
Number of months employed: \_\_\_\_\_ Final salary: \$ \_\_\_\_\_ / \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Hours per week: \_\_\_\_\_ Hire date: \_\_\_\_\_ / \_\_\_\_\_ End date: \_\_\_\_\_ / \_\_\_\_\_ Address: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Phone: \_\_\_\_\_  
Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_

I certify that all statements contained herein or submitted to the City of Lemoore as a part of this application are true, and I agree and understand that any misrepresentation or omission of facts contained in any material submitted as part of the employment process is cause for dismissal. I authorize a full background investigation to verify statements I have made herein to be conducted by the City, and authorize all former employers listed above to release employment information to the City. I further agree to submit to a medical examination as part of the appointment process.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*If you need a reasonable accommodation to attend the interview please contact the Personnel Office.*

CITY OF LEMOORE

VOLUNTARY APPLICANT SELF-IDENTIFICATION REPORT

All applicants are requested to voluntarily complete this form. This data will be kept separate from your application, and in no way will be used in the selection process. This data is required by federal agencies, and is being gathered for the purpose of determining whether recruitment and examination procedures and processes result in unfair discrimination against candidates because of age, sex, ethnic background, or disability. Your assistance in completing this form would be appreciated.

Position Applying for: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Please check one: \_\_\_\_\_ Female \_\_\_\_\_ Male Are you a U.S. Citizen? \_\_\_\_\_

(Non citizens must present evidence of permission to reside permanently in this country at the time of appointment.)

ETHNIC ORIGIN/RACE

\_\_\_\_\_ WHITE (not of Hispanic origin): All person having origins in any of the original peoples of Europe, North America, or the Middle East.

\_\_\_\_\_ AFRICAN – AMERICAN

\_\_\_\_\_ 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, but is not limited to, for example, China, Japan, the Philippine Islands and Samoa.

\_\_\_\_\_ AMERICAN INDIAN OR ALASKAN NATIVE: All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

\_\_\_\_\_ HISPANIC: All persons of Mexican, Puerto Rican, Cuban, Central or South America or other Spanish Culture or origin, regardless of race.

VETERAN/DISABLED STATUS

(Check items which apply)

Are you a Veteran? \_\_\_\_\_ Vietnam Era Veteran? \_\_\_\_\_

\_\_\_\_\_ Disabled (Military Related)

\_\_\_\_\_ Disabled (Non Military Related)

HOW DID YOU HEAR OF THIS OPENING?

\_\_\_\_\_ City Employee

\_\_\_\_\_ EDD

\_\_\_\_\_ Job Announcement at City Hall

\_\_\_\_\_ Jobs Available

\_\_\_\_\_ Western Cities Magazine

\_\_\_\_\_ JTO

\_\_\_\_\_ Lemoore Advance

\_\_\_\_\_ Hanford Sentinel

\_\_\_\_\_ Visalia Times Delta

\_\_\_\_\_ Fresno Bee

\_\_\_\_\_ Other (Specify) \_\_\_\_\_

\_\_\_\_\_