

An Equal Opportunity Employer
Human Resources Department, 300 First Street, Woodland, CA 95695. Phone: 530-661-5811 ~ Fax: 530-661-5813 ~ www.cityofwoodland.org

E۱	IPLOYMENT APP	PLICATION							
1.	NAME			2.	POSITION	APPLIED FOR	:		
	Last Name	First Name	Middle Name		Give Exact T	itle Shown on Annou	incement		
3.	MAILING ADDRE	ESS							
4	DUONE	Number	Street		City	State	9	Zip	
4.	PHONE Home	Work	Message			Email Address			
5.	VALID CALIFOR	NIA DRIVER'S LICE	-						
			ÁÁNumber ÁXXXXXXXX	XXXXXXX	((()(()()()()()()()()()()()()()()()()(AXX ÁAXXXXXClass	Ændors	ements	
6.	Have you ever been convicted, pled guilty or no contest to any criminal offense? Yes No lyes, please note below the date and place of each offense, the specific charge, the date and place of conviction, or plea, the fine or sentence received. You may omit any offense for which the only punishment imposed was a fine of less than \$50. Any offense for which you were convicted for which the punishment imposed was a fine in excess of \$50, which required serving a jail or prison sentence, or which required probation, MUST be reported. (A criminal record does not necessarily mean that the City cannot hire you. Each case is given individual consideration, based on the job for which you are applying.)								
7.	Can you perform	the essential function	ns of this position wit	th or	without rea	sonable accomm	nodations?	Yes 🗌 No 🗌	
8.		een discharged, rejec mployment within the							
9.	9. List any relatives who are employed by the City of Woodland								
10. From which source did you learn of this position?									
11. If you are under 18 can you furnish a work permit? Yes No									
12. Can you provide the documentation necessary to prove your identity and authorization to work? Yes \(\sqrt{\sqrt{No}} \sqrt{\sqrt{No}} \sqrt{\sqrt{No}} \sqrt{\sqrt{No}} \sqrt{\sqrt{No}}									
Е	DUCATION		v, give a complete						
-		rade completed	Name and lo	catio	n of last Hiç	gh School attend	ed	Did you graduate?	
	1 2 3 4 5 6 7	7 8 9 10 11 12						☐Yes ☐ No	
Describe fully below any business, trade school, or college education.									
_	Name and loca	ation of Schools	Degree or de	escr	ption of cours	ses, hours of credi	t	Did you graduate?	
								Yes No	
								Yes No No	
								Yes ☐ No ☐	
Please list any professional licenses or certificates and Issuing Agency and Number									
-									

Complete this section even if you attach a résumé.

EXPERIENCE: List all jobs you have held in the <u>LAST TEN YEARS.</u> PUT YOUR PRESENT OR MOST RECENT JOB FIRST. If you need more space, attach additional sheets.

Employer: S	Supervisor's Phone:						
Address:	-						
Number Street Supervisor Name:	City State Zip May we contact this employer? Yes No						
Position Title:	Employed from to Last rate of pay:						
Duties and Responsibilities:							
Reason for leaving (be specific):							
Employer: S	Supervisor's Phone:						
Address: Number Street	City State Zip						
Supervisor Name:	'						
Position Title:	Employed from to Last rate of pay:						
Duties and Responsibilities:							
Reason for leaving (be specific):							
Employer: S	Supervisor's Phone:						
Address:	O'the Other Time						
Number Street Supervisor Name:	City State Zip May we contact this employer? Yes ☐ No ☐						
Position Title:							
Duties and Responsibilities:							
Reason for leaving (be specific):							
INFORMATION							
 The City of Woodland accepts and considers applications for eligibility lists or vacant positions only. Your completed application must be received by the HR Department by the final filing date and time as specified on the job announcement. Postmarks are not accepted. Applicants will be notified of their status at the end of the recruitment process. Complete all sections. Incomplete or illegible applications will not be considered. Reasonable testing arrangements may be made to accommodate candidates with disabilities if a minimum of one week notice is given to the HR department. 							
Applicants selected for regular classified City appointment must successfully complete and pass a background investigation including, but not limited to, a medical examination and a drug/alcohol test.							
CERTIFICATION: I hereby certify that all statements made on this application and any attachments are true and complete to the best of my knowledge. I understand that any false, incomplete or incorrect statement may result in my disqualification from the examination process or dismissal from employment with the City of Woodland. I authorize the City of Woodland to investigate my references, work record, education, or any matters relating to my suitability for employment. I authorize my former or current employers and educational institutions to release any information they may have concerning my employment or education, to the City of Woodland. I hereby give permission to the employer to seek to verify and supplement the information set forth in the application and I release from all liability, damages, or legal claims every person seeking or providing information, whether oral and written. A photocopy of this release shall be as valid as the original, and may be relied upon by all persons providing information. I further agree that if the City of Woodland is required to defend itself against any claim due to my breach of any provision in this Certification, then I shall pay for the City of Woodland's reasonable attorneys' fees. I also authorize the City of Woodland to obtain and review any documents or records, including driving records, which are applicable to my employment.							
Signature of Applicant (Sign in Ink)	Date Signed						