

DATE STAMP



COUNTY OF EL DORADO
HUMAN RESOURCES DEPARTMENT
APPLICATION FOR EMPLOYMENT

330 FAIR LANE, PLACERVILLE, CALIFORNIA 95667
TELEPHONE: 530-621-5565 TDD 530-621-4693
24 Hr. JOB LINE 530-621-5579
www.co.el-dorado.ca.us

FOR PERSONNEL USE ONLY

- Accepted
Rejected
Experience
Education
Late
Other
DATE:

Please TYPE or PRINT in dark ink. An application completed in insufficient detail, without signature, or in pencil will constitute failure of the initial step of the examination process and the application will be rejected.

IMPORTANT: YOU WILL BE NOTIFIED BY MAIL OF YOUR STATUS. EL DORADO COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER. WOMEN, MINORITIES, AND THE DISABLED ARE ENCOURAGED TO APPLY. IF YOU NEED ACCOMMODATION IN THE EXAMINATION/INTERVIEW PROCESS, PLEASE CONTACT THE HUMAN RESOURCES DEPARTMENT AT LEAST FIVE (5) WORKING DAYS BEFORE A SCHEDULED EXAMINATION/INTERVIEW.

1. PLEASE PRINT THE EXACT TITLE OF POSITION FOR WHICH YOU ARE APPLYING:

2. NAME-FIRST: MIDDLE: LAST:
3. MAILING ADDRESS: CITY STATE ZIP
4. HOME PHONE: BUSINESS PHONE: SS#

Answer by checking appropriate box YES NO

5. Can you, after an offer of employment, submit verification of the legal right to work in the U.S.?
6. Do you object to the County making inquiry of your present employer?
7. Have you ever been discharged from a position or terminated during a probationary period...
8. Have you ever been employed by El Dorado County?
9. Do you have a valid driver's license to operate a motor vehicle?
10. Do you have any relations by blood or marriage employed by the County of El Dorado?
11. Have you ever been convicted of an offense against the law or forfeited collateral?
12. Please check the type of employment you are willing to accept: FULL-TIME PART-TIME TEMPORARY
13. Please check the location of the position you are applying for: SOUTH LAKE TAHOE PLACERVILLE
14. In addition to English, I can: speak read write fluently
15. SPACE IS PROVIDED FOR AN EXPLANATION, IF NECESSARY, FOR ITEMS 7, 8, 10, 11 OR TO LIST ANY SPECIAL SKILLS.

INSUFFICIENTLY COMPLETED APPLICATIONS WILL BE REJECTED

TURN OVER APPLICATION AND FILL OUT BEFORE SIGNING BELOW

16. CERTIFICATE OF APPLICANT: Recheck the Application to be sure it is complete and read the following carefully before signing. Applicant must sign personally. I hereby certify that all statements made in this application are true and I agree and understand that any misstatement or omission of material facts herein may cause forfeiture on my part to any employment or payment as an employee in the service of the County of El Dorado.

Signature Date page 1 of 3

**INSUFFICIENTLY COMPLETED APPLICATIONS WILL BE REJECTED**

(i.e. "See attached resume" is unacceptable)

**PLEASE READ THE MINIMUM QUALIFICATIONS SECTION OF THE EXAMINATION BULLETIN BEFORE FILLING OUT THIS SIDE**

**17. EDUCATION AND EXPERIENCE**

A. Do you possess a High School Diploma or G.E.D.?     Yes     No

B. NAME AND LOCATION OF COLLEGE OR UNIVERSITY	COURSE OF STUDY	SEMESTER UNITS	QUARTER UNITS	DEGREE	DATE COMPLETED

C. BUSINESS, CORRESPONDENCE, TRADE, OR SERVICE SCHOOLS: \_\_\_\_\_ COURSE OF STUDY: \_\_\_\_\_

<p>18. CERTIFICATES, LICENSES, OR PROFESSIONAL REGISTRATION WHICH APPLY TO THIS POSITION:</p> <p>DATE ISSUED _____ TYPE OF LICENSE &amp; REGISTRATION NO. _____</p> <p>DATE ISSUED _____ TYPE OF LICENSE &amp; REGISTRATION NO. _____</p>	<p>19. IF THIS POSITION REQUIRES COMPUTER, TYPING, AND/OR SHORTHAND SKILLS, PLEASE INDICATE : YES NO</p> <p>Computer    <input type="checkbox"/>    <input type="checkbox"/></p> <p>Typing        <input type="checkbox"/>    <input type="checkbox"/> _____ WPM</p> <p>Steno         <input type="checkbox"/>    <input type="checkbox"/> _____ WPM</p>
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20. EXPERIENCE: Begin with your most recent experience. List ALL experience in the last ten years, plus ALL experience relevant to this position, including U.S. Military Service. Give details of the experience which you believe helps you meet the requirements of the position for which you are applying. Show actual time (number hours/days, number of hours/weeks) spent in such experience. If "volunteer," state in the space following salary. Resumes are encouraged, BUT WILL NOT BE ACCEPTED IN LIEU OF ANY PORTION OF THE STANDARD EL DORADO COUNTY APPLICATION. All materials submitted become the property of El Dorado County. You may attach additional sheets if necessary.

<p>PERIOD OF EMPLOYMENT</p> <p>FROM: _____</p> <p>TO: _____</p> <p>TOTAL: _____ YR. _____ MO.</p> <p><input type="checkbox"/> FULL TIME</p> <p><input type="checkbox"/> PART TIME</p> <p>If part time, give exact or average hours per week: _____</p>	<p>JOB TITLE AND MOST RELEVANT DUTIES PERFORMED</p> <p>TITLE: _____ NO. SUPERVISED _____</p> <p>SALARY: \$ _____</p> <p>DUTIES: _____</p>	<p>NAME AND ADDRESS OF EMPLOYER (S)</p> <p>EMPLOYER: _____</p> <p>ADDRESS: _____</p> <p>IMMEDIATE SUPERVISOR: _____</p> <p>PHONE NO. : _____</p> <p>REASON FOR LEAVING: _____</p>
<p>PERIOD OF EMPLOYMENT</p> <p>FROM: _____</p> <p>TO: _____</p> <p>TOTAL: _____ YR. _____ MO.</p> <p><input type="checkbox"/> FULL TIME</p> <p><input type="checkbox"/> PART TIME</p> <p>If part time, give exact or average hours per week: _____</p>	<p>JOB TITLE AND MOST RELEVANT DUTIES PERFORMED</p> <p>TITLE: _____ NO. SUPERVISED _____</p> <p>SALARY: \$ _____</p> <p>DUTIES: _____</p>	<p>NAME AND ADDRESS OF EMPLOYER (S)</p> <p>EMPLOYER: _____</p> <p>ADDRESS: _____</p> <p>IMMEDIATE SUPERVISOR: _____</p> <p>PHONE NO. : _____</p> <p>REASON FOR LEAVING: _____</p>
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CONFIDENTIAL

El Dorado County Affirmative Action Questionnaire

The County of El Dorado requests all persons to complete this portion of the application under the provisions of the Government Code Section 1233. This is not a part of the application and is removed before screening, it is used for AA/EEO purposes only. No individual personnel selections are made based on the information. Please answer the following questions to the best of your ability. Your cooperation is appreciated.

ETHNIC CATEGORY

- 1.  WHITE (Not of Hispanic origin). All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.
- 2.  BLACK (Not of Hispanic origin). All persons having origins in any of the Black racial groups of Africa.
- 3.  HISPANIC. All persons of Mexico, Puerto Rico, Cuba, Central or South America, or other Spanish culture or origin, regardless of race.
- 4.  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, for example, China, Japan, Korea, the Philippine Islands, and Samoa.
- 5.  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.

TITLE APPLIED FOR:	DATE:
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I LEARNED ABOUT THIS JOB OPENING THROUGH (check appropriate boxes):

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>1. <input type="checkbox"/> A FRIEND OR RELATIVE</li> <li>2. <input type="checkbox"/> A COUNTY EMPLOYEE</li> <li>3. <input type="checkbox"/> COUNTY EMPLOYMENT ANNOUNCEMENT</li> <li>4. <input type="checkbox"/> COUNTY'S PERSONNEL OFFICE</li> </ul> | <ul style="list-style-type: none"> <li>5. <input type="checkbox"/> JOB FAIR, AN ORGANIZATION, OR GROUP (Which?): _____</li> <li>6. <input type="checkbox"/> ADVERTISEMENT (Which paper or magazine?): _____</li> <li>7. <input type="checkbox"/> WEBSITE (Please specify site): _____</li> <li>8. <input type="checkbox"/> OTHER MEANS (Please specify): _____</li> </ul> |
|--|---|

GENDER:  Male  Female      AGE: Are you 40 years of age or older?  YES  NO

VETERAN'S PREFERENCE: You may claim: A 5 point preference if you were discharged under other than dishonorable conditions; OR a 10 point preference if you are a service -connected disabled vet; spouse of a totally & permanently disabled vet; or surviving unremarried spouse of a vet who died on active duty or as a result of a disability incurred on active duty.

ARE YOU REQUESTING VETERAN'S PREFERENCE POINTS?  YES  NO IF YES, HOW MANY?  5 POINTS  10 POINTS

TO RECEIVE CREDIT: Submit DD214, VA Disability Award letter, and/or VA Dependent Indemnity Compensation (Veteran's DIC) Award letter, as applicable. Proof NOT accepted after initial notification of examination status. Preference granted only for open recruitments.