

Applicant Name: _____

12. EDUCATION Did you graduate from High School? <input type="checkbox"/> Yes <input type="checkbox"/> No If you did not graduate from High School, do you have a General Education Development (G.E.D.) equivalent? <input type="checkbox"/> Yes <input type="checkbox"/> No				
College or University (Include Graduate Study)	Major Subject	Minor Subject	Units Completed Semester Quarter	Degree(s) Received

13. LICENSES AND CERTIFICATES (State, Professional, Nursing, Trade, etc., which are required by this position)			
Description	Issued by	Number	Expiration date

14. EMPLOYMENT HISTORY

- Resumes will not be accepted in place of a completed application.
- Complete all questions and respond to all requirements listed in the Examination Bulletin.
- Describe different positions held with the same employer in different blocks.
- List your most recent experience first and attach additional sheets if necessary.
- List relevant volunteer experience.

May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No Salary amount: Salary type: <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly Hours worked per week: Employed from: Month _____ Year _____ Employed to: Month _____ Year _____ Total months employed:	Name and address of present employer Job title and description of duties Reason for leaving
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Salary amount: \$ Salary type: <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly Hours worked per week: Employed from: Month _____ Year _____ Employed to: Month _____ Year _____ Total months employed:	Name and address of previous employer Job title and description of duties Reason for leaving
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Salary amount: \$ Salary type: <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly Hours worked per week: Employed from: Month _____ Year _____ Employed to: Month _____ Year _____ Total months employed:	Name and address of previous employer Job title and description of duties Reason for leaving
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Salary amount: \$ Salary type: <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly Hours worked per week: Employed from: Month _____ Year _____ Employed to: Month _____ Year _____ Total months employed:	Name and address of previous employer Job title and description of duties Reason for leaving
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15. CERTIFICATION: I certify that all of the statements made on this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that I may be fingerprinted and investigated prior to appointment.

Signature of applicant (Sign in ink)	Date signed
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APPLICANT QUESTIONNAIRE

Your voluntary answers to this section will provide statistics needed to evaluate our recruitment program as well as prepare statistical reports required by Federal, State and County agencies. This section will be detached and no decisions in the test process will be based on it.

HOW DID YOU FIND OUT ABOUT THIS JOB? (Check one or more)

- Exam announcement County employee Notification card Newspaper T.V.
 Trade journal Radio Telephone recording Internet
 Other (specify) _____

DISABILITY:

- Disabled

SEX:

- Male
 Female

AGE GROUP:

- Under 21
 21 - 29
 30 - 39
 40 - 49
 50 - 59
 60 or over

ETHNIC CODE:

- White (Caucasian, Anglo-Saxon)
 Hispanic (Mexican, Latin American, Spanish-descent, Cuban, Puerto Rican)
 Black (African, Jamaican, Trinidadian, West Indian)
 American Indian or Alaska Native
 Asian or Pacific Islander
 Filipino

INFORMATION PRACTICES AND INDIVIDUAL PRIVACY

1. Unless otherwise noted on the exam bulletin, the Recruiting and Examining Section of the Department of Human Resources is requesting this information.
2. Unless otherwise noted on the exam bulletin, the Department of Human Resources at the address noted on the front of the application (phone (408) 299-2341) shall, upon request, inform an individual of the location of his or her records and the categories of persons who use the information in those records.
3. The Santa Clara County Code (Merit System Rules) authorizes the maintenance of this information.
4. Applications which do not contain required information will not be considered.
5. Information collected on this application is used by departmental employees who are required to administer the testing program. Statistical reports, which do not identify the applicant, are also prepared from this information.
6. Data may be disclosed to authorized representatives of other County agencies performing decentralized testing activities, to authorized auditors (Federal, State and internal) and by Court Order.
7. The applicant or authorized representative has the right to access his or her records. Testing materials are excluded from this provision.
8. Unless otherwise noted on the exam bulletin, the procedure whereby an individual can access his or her records, contest its validity, and request amendments or deletions of data is available from the Department of Human Resources (location and phone noted in item 2 above).

Thank you for applying for employment with the County of Santa Clara.