



**CITY OF SOUTH PASADENA**  
 1414 Mission Street • South Pasadena, CA 91030  
 (626) 403-7200

[www.ci.south-pasadena.ca.us/employment](http://www.ci.south-pasadena.ca.us/employment)

## EMPLOYMENT APPLICATION

POSITION APPLIED FOR: \_\_\_\_\_

LAST NAME	FIRST NAME	MIDDLE INITIAL	<b>For Office Use Only</b>  <b>Eligibility Review:</b> ___ Qualified ___ Disqualified ___ Pending <b>Reason Ineligible:</b> ___ Education ___ Experience ___ Late Filing ___ Min. Age ___ Other _____	
NUMBER & STREET				
CITY		STATE		ZIP CODE
HOME PHONE	BUSINESS PHONE	CELL PHONE		
EMAIL ADDRESS		DRIVER'S LICENSE "If Required"		
		Number:		Class: State:

  

<p>A. Are You over 18? If under 18, can you provide required proof of your eligibility to work? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>B. Can you, if hired, submit verification of your legal right to work in the U.S.A.? <i>You will be required to furnish such verification prior to employment.</i> <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>C. Are you currently employed? May we contact your present employer? <i>If "no", please provide explanation under "remarks"</i> <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>D. Have you ever worked using a name different than that used on this application? If yes, please indicate: _____</p>	<p>E. Do you have a physical or mental condition which will require any special accommodation to participate in the selection process? <i>If yes, please explain what type(s) of accommodation is required. Under "remarks"</i> <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>F. Have you ever been convicted of any offense other than a minor traffic violation/infraction? <i>If "yes", you must fully disclose the nature of each conviction, city, date, and disposition under "remarks".</i> <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>G. Have you ever been discharged or asked to resign from a position? <i>If "yes" please provide an explanation under "remarks" below.</i> <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>H. Do you have any relatives working for the City of South Pasadena? <i>If "yes", state relationship, name and Dept. employed</i> _____</p>
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Requirement to provide an explanation to any of the above questions will not automatically disqualify this application. However, failure to provide complete and accurate information may be cause for disqualification.

**PLEASE CONTACT CITY HALL IF YOU REQUIRE VISUAL ASSISTANCE WITH THIS APPLICATION**

**Remarks**

### REFERENCES

Please provide three work-related references

1	Name and title _____	Business or occupation _____	Phone _____
2	Name and title _____	Business or occupation _____	Phone _____
3	Name and title _____	Business or occupation _____	Phone _____

### EDUCATION

If required, can you show proof that you graduated from **High School** or received your G.E.D. Certificate  Yes  No

Names and Locations of High School, Colleges, Universities and Trade Schools	Course of Study	Degree or Certificate	Completed (Yes/No)

**Other Licenses or Professional Certificates:**

### SKILLS/PROFESSIONAL EXPERTISE

Include any special skills, equipment you can operate, or memberships that you believe may enhance your qualifications:

*Notation Speed* \_\_\_\_\_  
*Typing Speed* \_\_\_\_\_ (Certificate  Yes  No )

### EXPERIENCE

Please provide your work experience for the last 10 years beginning with your most recent job and include any periods of unemployment. Attach an additional sheet if necessary to report qualifying experience completely.

Employer:	Title of Your Position		
From: Month/Year To: Month/Year	Duties:		
Street Address:			
City and State:			
Name of Supervisor: Phone:	Reason for Leaving:	Salary:	Hours Per Week:

Employer:	Title of Your Position		
From: Month/Year To: Month/Year	Duties:		
Street Address:			
City and State:			
Name of Supervisor: Phone:	Reason for Leaving:	Salary:	Hours Per Week:

Employer:	Title of Your Position		
From: Month/Year To: Month/Year	Duties:		
Street Address:			
City and State:			
Name of Supervisor: Phone:	Reason for Leaving:	Salary:	Hours Per Week:

Employer:	Title of Your Position		
From: Month/Year To: Month/Year	Duties:		
Street Address:			
City and State:			
Name of Supervisor: Phone:	Reason for Leaving:	Salary:	Hours Per Week:

I certify that all statements on this application are true and complete to the best of my knowledge. I understand false or incomplete statements shall be sufficient cause for disqualification or dismissal. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

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

## APPLICANT STATISTICAL INFORMATION

In order to comply with Federal and State Equal Employment Opportunity requirements, we would appreciate your voluntary cooperation in providing the following information. This information will be used for statistical purpose only and will not be used as part of the testing process.

Position Applied for: \_\_\_\_\_

Date Applied: \_\_\_\_\_

CHECK ONE SPACE ONLY FOR THE ETHNIC CATEGORY YOU MOST CLOSELY IDENTIFY WITH:

WHITE       BLACK       HISPANIC       ASIAN       AMERICAN INDIAN

GENDER

MALE

FEMALE

AGE:

40 OR OVER

PHYSICALLY OR  
MENTALLY DISABLED

### HOW DID YOU FIRST LEARN ABOUT THIS EMPLOYMENT OPPORUNITY?

Website:

City's Website - How were you referred to our website?

Yahoo/Hot Jobs

Other: \_\_\_\_\_

Other job related website, please specify: \_\_\_\_\_

Newspaper:

Specify: \_\_\_\_\_

Publications:

Jobs Available

Western Cities

Other (Explain): \_\_\_\_\_

Walked In       Heard it from someone       Online

Saw is posted (Specify Location): \_\_\_\_\_

Name (Print) \_\_\_\_\_ Signature \_\_\_\_\_