

COUNTY OF IMPERIAL
EMPLOYMENT APPLICATION

Human Resources & Risk Management Department
940 West Main St., Suite 101, El Centro, CA 92243
Phone: (442) 265-1148 *TTY: (442) 265-1169
Fax: (442) 265-1167
www.co.imperial.ca.us

COMPLETION OF THIS SECTION IS VOLUNTARY

PLEASE PRINT:

Last Name

First Name

Middle Name

Position Applied for/Department

Date

A. IDENTIFICATION FORM

Imperial County is asking all applicants to complete this form in order to comply with U.S. Government, State and County equal opportunity requirements. Data collected will be used for statistical purposes and to measure effectiveness of recruitment efforts. Information you provide will not be used in any way in the selection process and will be confidential.

Male

Female

Decline to state

Specific Instructions: The two questions below are designed to identify your ethnicity and race. **Regardless of your answer to question 1, go to question 2.**

Question 1. Are you Hispanic or Latino? (A person of Cuban, Mexican, Puerto Rican, South of Central American or other Spanish culture or origin, regardless of race.) Yes No

Question 2. Please select the racial category or categories with which you most closely identify by marking the appropriate box. Check as many as apply.

RACIAL CATEGORY (Check as many as apply.)	DEFINITION OF CATEGORY
American Indian or Alaska Native	A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
Asian	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
Black or African American	A person having origins in any of the black racial groups of Africa.
Native Hawaiian or Other Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
White	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

B. VETERAN SERVICE

Are you a Veteran? Yes No If so, branch of service: _____

Dates of active duty: From: _____ To: _____

C. WE WOULD APPRECIATE YOUR RESPONSE TO THE FOLLOWING QUESTION

How did you first learn about this job opportunity? Choose one.

County Website

One-Stop

Newspaper

Other: _____

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RESUME NOT ACCEPTED IN LIEU OF APPLICATION. FAILURE TO COMPLETE ALL ITEMS ON THIS APPLICATION WILL RESULT IN YOUR ELIMINATION FROM THE RECRUITMENT PROCESS.

Please use a typewriter or print in ink. All statements will be subject to verification.

1. Position: _____ 2. Social Security #: _____
 (Give exact title and department as listed on job bulletin)

3. Name: _____
 (Last) (First) (Middle)

4. Mailing Address: _____ City: _____ State: _____ Zip: _____

5. Home Phone/ Mobile Phone: _____ Business/Msg Phone: _____ Email: _____

Please list any other names that you have ever used:

6. Please indicate any hours and shifts which you are **not** available to work. Hours: _____ Shift: _____

7. Prior to employment each new employee of Imperial County must fill out and sign the Oath of Allegiance required of all public employees by Section 3, Article XX of the Constitution of the State of California. Is there any reason why you cannot sign this Oath of Allegiance? Yes No

If yes, please explain: _____

8. Are you requesting veteran's preference? **If YES, you must attach a copy of your DD214 prior to the final filing date.** Yes No

Branch of Service: _____ Enlistment Date: _____ Discharge Date: _____ Type of Discharge: _____

9. Have you previously been employed by the County of Imperial? Yes No

10. Are you fluent in any language in addition to English? If yes, please specify your skills.

Language: _____ Understand Speak Write Read

11. Do you possess a valid California driver's license? Yes No License# _____ Class: _____

12. If required by this position, please list all certificates, licenses or other credentials.

Title: _____ Number: _____ Issued by: _____ Expiration Date: _____

13. Do you possess a high school diploma or equivalent? Yes No

IMPORTANT: In order for the County to consider the education listed below as part of your qualifications for the position you are applying for, you must attach a copy of your college transcript (from an accredited institution), degree, license, certificate or diploma with your application. In addition, foreign degree must have U.S. Equivalent report. Failure to include this information may result in your application being disqualified.

Name of College, University, Vocational School or Institute	Major or Course of Study	Years Completed	# of Units Completed	Name of Degree or Certification	Date Degree or Certification Completed

14. In case of emergency notify:

Name: _____ Telephone: _____

The County of Imperial does not unlawfully discriminate on any prohibited basis under state or federal law including prohibitions listed in title VII, the Age and Discrimination and Employment Act, section 504 of the Rehabilitation Act of 1973, the Fair Employment and Housing Act, and the Americans with Disabilities Act.

If you feel you have a need for special arrangements due to a disability in order to participate in the recruitment process, call (442) 265-1148 or TTY (442) 265-1169.

***NOTE: IF YOU BELIEVE YOUR CIVIL RIGHTS IN EMPLOYMENT MATTERS HAVE BEEN VIOLATED AT ANY TIME DURING THE COURSE OF YOUR CONSIDERATION FOR EMPLOYMENT, CONTACT THE EQUAL EMPLOYMENT OPPORTUNITY OFFICE, 940 W. MAIN STREET, SUITE 208, EL CENTRO, CA 92243, PHONE: (442) 265-1001 (DO NOT CALL THIS NUMBER FOR GENERAL EMPLOYMENT OF JOB APPLICATION INFORMATION).**

<p style="text-align: center;">SUBMITTING YOUR APPLICATION</p> <p>Please submit your application no later than 5:00 pm on the established deadline. We do not accept postmarks. Applications are accepted via fax, mail, or in person to the Human Resources Office located at: 940 W Main Street, Suite 101, El Centro, CA 92243</p> <p>If your application is faxed, you will be required to submit an original application at a later time.</p>	HUMAN RESOURCES DEPARTMENT USE ONLY STAMPED RECEIVED
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EMPLOYMENT HISTORY

1. List your complete employment history for the last ten years beginning with your most recent.
2. List all experience, paid or voluntary, related to the position.
3. Use different blocks for different positions with same employer.
4. Additional sheets may be attached when necessary.

Resumes will NOT be accepted in place of a completed application.

DATES EMPLOYED From: _____ To: _____ Total Years/Months: _____ Hours Per Week: _____ May we contact this Employer? YES NO	NAME OF EMPLOYER: _____ ADDRESS: _____ JOB TITLE: _____ DUTIES: _____ _____ _____ SUPERVISOR'S NAME/TITLE: _____ PHONE: _____ REASON FOR LEAVING: _____
DATES EMPLOYED From: _____ To: _____ Total Years/Months: _____ Hours Per Week: _____ May we contact this Employer? YES NO	NAME OF EMPLOYER: _____ ADDRESS: _____ JOB TITLE: _____ DUTIES: _____ _____ _____ SUPERVISOR'S NAME/TITLE: _____ PHONE: _____ REASON FOR LEAVING: _____
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IMPORTANT NOTICE REGARDING EMPLOYMENT:

At time of hire, County employees must meet the documentation requirements of the Immigration Reform and Control Act of 1986. Employment with the County of Imperial does not occur until the Appointing Authority and the Director of Human Resource & Risk Management sign and file a formal document appointing the applicant to a job position following successful completion of all employment procedures, including a medical evaluation. For certain "sensitive" positions, as defined by County policy, the medical evaluation will include testing for drugs and alcohol. Any information obtained after a conditional offer is made but before the formal document is filed may also constitute grounds for withdrawal of the conditional offer. Until formal appointment is made in this manner, any offers of County employment are conditional and preliminary and may be withdrawn.

APPLICANT CONSENT AND RELEASE FORM (READ CAREFULLY BEFORE SIGNING):

I hereby certify that all statements made in this application are true, and I agree and understand that any misstatement of material facts herein will cause forfeiture on my part of any employment in the service of the County of Imperial. I further agree to submit a complete medical examination and, upon employment, to furnish such proof or identification and legal right to work in the United States as may be required. I also understand that once hired I may be required to provide proof of my birth date. All statements made in this application may be verified, including checks of police records and former employers.

I request, authorize and consent to the release of information to the County of Imperial, regarding my previous employment and authorize all past employers or agents that they may designate, to respond to oral or written inquiries from the County of Imperial regarding my employment record, including, but not limited to, positions held, dates of employment, work performance, disciplinary records, and any incidents of dishonesty, insubordination, violence, and/or unsafe harmful, or threatening behavior. I agree to release and discharge the County of Imperial and all past employers, and their respective officers, agents, and employees, from any and all claims, demands, damages, and all other liabilities arising out of, or as a result of, any oral or written inquiry or any information provided or released, as a result of any written or oral inquiry by the County of Imperial.

I understand that this application is not a contract, and it is not an offer of employment. If I am offered employment, I understand that such offer is subject to the employment conditions listed above.

Signature

Date