



**CITY OF TEMPLE CITY
APPLICATION FOR EMPLOYMENT**

Personnel Office
9701 Las Tunas Drive
Temple City, CA 91780
(626) 285-2171

AN EQUAL OPPORTUNITY EMPLOYER

Office Use Only

Rec'd: _____
(Date)

By: _____
(Initials)

For what position are you applying? _____

GENERAL BACKGROUND INFORMATION

Name: _____
First Middle Last

Address: _____

City State Zip Code
Telephone Numbers: Home: () Work: ()

Social Security No.: _____ CA Drivers License No.: _____
Exp. Date: _____

In case of emergency, notify:
Name: _____ Phone: ()
Address: _____

Please answer the following questions, making any necessary comments in the section below.

1. Are you over 18 years of age? Yes No
2. Can you, after employment submit verification of your legal right to work in the U.S.? (If no, please explain) Yes No
3. Were you ever discharged or forced to resign because of misconduct or unsatisfactory service? (If yes, please explain) Yes No
4. May we contact your present employer as to your qualifications? Yes No
5. Have you ever applied here before? (If yes, when and for what positions?) Yes No
6. Will you accept temporary work? Yes No
7. Have you ever been convicted of a felony, or within the past 10 years, a misdemeanor which resulted in imprisonment? (If yes, give date, city, offense and disposition.) (Conviction is not an automatic bar to employment.) Yes No
8. Do you have any relatives or friends in our employ? (Please give name/s.) Yes No
9. Do you have outside business interests? (If yes, please explain.) Yes No

COMMENTS: Please identify comments by question number. (If you need more room, attach an extra sheet of paper.)

If you have served in the armed forces of the United states, give the dates of active service:

From: _____ To: _____ Rank: _____
Branch: _____ Type of Discharge: _____

EDUCATION

Circle Highest Grade Completed

1 2 3 4 5 6 7 8 9 10 11 12

Name of School _____

Did you graduate? _____

College, Business or Trade Schools Attended	Attendance Dates From To	Degree or Units Completed	Year of Degree	Major

Other Relative Information: _____

OFFICE SKILLS

Typing (if applicable) WPM _____ Shorthand (if applicable) WPM _____

Office Machines: _____

EXPERIENCE

List jobs you have held in the last 10 years – most recent first. (If you need more room, use an extra sheet of paper.)

From: _____ To: _____ Title: _____ Salary: _____
Name and Address of Employer: _____ Duties: _____

Reason for leaving: _____

From: _____ To: _____ Title: _____ Salary: _____
Name and Address of Employer: _____ Duties: _____

Reason for leaving: _____

From: _____ To: _____ Title: _____ Salary: _____
Name and Address of Employer: _____ Duties: _____

Reason for leaving: _____

EXPERIENCE (CONTINUED)

From: _____ To: _____

Title: _____ Salary: _____

Name and Address of Employer: _____

Duties: _____

Reason for leaving: _____

From: _____ To: _____

Title: _____ Salary: _____

Name and Address of Employer: _____

Duties: _____

Reason for leaving: _____

REFERENCES

Please list references (other than relatives).

Name: _____ Phone: () _____

Address: _____

Name: _____ Phone: () _____

Address: _____

Name: _____ Phone: () _____

Address: _____

I hereby certify that all statements made in this application are true, and complete and that any misrepresentation of material facts may subject me to disqualification or dismissal.

Signature: _____ Date: _____