



COUNTY OF YOLO
 HUMAN RESOURCES
 625 COURT STREET, ROOM 101
 WOODLAND, CA. 95695
 (530) 666-8055
 www.yolocounty.org

HUMAN RESOURCES USE ONLY

Accepted Not Accepted

1. Education _____

2. Experience _____

3. Lic/Reg. _____

4. Other _____

Analyst: _____

EMPLOYMENT APPLICATION

Instructions: Please complete all sections of the application. Incomplete or illegible applications will not be considered.

- A separate application is required for each position.
- Notify the Human Resources Office of any change of address.

1. POSITION APPLYING FOR: _____

2. NAME _____ Home Phone: _____
 Last First Middle Initial
 Work Phone: _____

3. ADDRESS _____
 Street City State Zip Code

4. Social Security Number: _____ (Used for applicant record control; disclosure is voluntary.)

5. Do you speak another language fluently? Yes No If yes, specify: _____

6. Do you claim Veterans' Preference as described on the examination notice? Yes No Do you claim Veterans' disability? Yes No Attach DD214 or GS-6954 to completed application. (Copies will not be returned). Discharge must be verified in the Human Resources Office on or before the final filing date for the position to qualify for preference credit.

7. Have you ever been CONVICTED of a MISDEMEANOR or FELONY other than minor traffic violations and/or placed on probation, fined, given a suspended sentence in court or convicted of a federal offense under the military judicial system? (Driving under the influence, reckless or hit-and-run driving are not minor traffic violations.) Yes No If yes, please explain in Section 13, adding an attachment if necessary, regarding the date, place and circumstances of the conviction and the fine or sentence received. Penal Code Section 1203.4 provides that expunged records must be reported to public agencies, so you must include such a conviction even if it was expunged or removed from your record. You may exclude any offense for which the only punishment imposed was a fine of less than \$250. If offered employment, your fingerprints will be sent to State and/or Federal agencies. All offers of employment or continued employment will be subject to satisfactory review of any criminal convictions. (A criminal record is not necessarily a bar to employment. Each case is given individual consideration, based on job relatedness.)

8. Have you ever been discharged, rejected during probation, or resigned under pressure or unfavorable circumstances within the past ten years? Yes No If yes, explain in Section 13.

13. Note: Explain fully items 7 and 8 in this section. Please attach additional sheets, if necessary.

9. Valid Driver's License No. _____ State _____ Class _____
 (Only if required on job announcement) Expiration Date _____

10. Certain County bargaining units restrict promotions during the initial probationary period. To help us determine if this applies to you, please indicate below:
 I am a current County employee. Yes No
 I am a current County employee with less than one years' service. Yes No

11. **CERTIFICATION:** I hereby certify that all statements made on this application are true and complete to the best of my knowledge. I understand that any false, incomplete or incorrect statements may result in my disqualification from the examination process or dismissal from employment with the County of Yolo. Initial here _____

FOR HUMAN RESOURCES USE ONLY:

12. I authorize the employers and educational institutions identified in this Employment Application to release any information they may have concerning my employment or education, to the County of Yolo. Yes No If No, explain in the Remarks Section on reverse.

 Signature of Applicant (Sign in Ink) Date Signed

NOTE: Reasonable testing arrangements may be made to accommodate candidates with disabilities or who are unable to attend a scheduled test due to religious reasons. If applicable, such candidates must call Human Resources at (530) 666-8055 prior to a scheduled test date to request any necessary accommodations.

EDUCATION AND TRAINING - A copy of degree, license or certificate must accompany your application if required on job announcement.

Do you have a High School Diploma or a G.E.D. certificate? Yes No

Names of Colleges/ Universities attended and locations	Course of Study/Major	Semester Units	Quarter Units	Type of Degree Earned
Professional License or Certificate, if required	Issuing Agency	Serial No. or Identification No.	Date Issued	Expiration Date

EMPLOYMENT HISTORY

Give complete information for jobs held during the past ten years. Please be sure to include in your employment history experience which meets the Employment Standards for the position for which you are applying. Attach additional sheets if more space is needed. Show your present or most recent job first. Verifiable voluntary experience may be considered if job related. Please indicate if you were employed under another name in remarks section below. Inquiries may be made of your former employers. May we contact your present employer? Yes No

EVEN IF YOU SUBMIT A RESUME, YOU MUST STILL COMPLETE THE EMPLOYMENT HISTORY SECTION LISTED BELOW.

Dates From _____ To _____ Total _____ Yrs. Mos.	Employer's Name & Address _____ Supervisor _____ Phone _____ Salary/Month: \$ _____	Title _____ Reason for Leaving _____ Duties: _____
Dates From _____ To _____ Total _____ Yrs. Mos.	Employer's Name & Address _____ Supervisor _____ Phone _____ Salary/Month: \$ _____	Title _____ Reason for Leaving _____ Duties: _____
Dates From _____ To _____ Total _____ Yrs. Mos.	Employer's Name & Address _____ Supervisor _____ Phone _____ Salary/Month: \$ _____	Title _____ Reason for Leaving _____ Duties: _____

REMARKS:

RECRUITMENT QUESTIONNAIRE

Please indicate how you became aware of this job opportunity.

WORD OF MOUTH

- County employee
- Relative or friend

ADVERTISEMENT

- Newspaper: specify _____
- Internet Advertisement: specify _____
- Trade or Professional Journal
- Radio
- Community Organization: _____

BULLETIN BOARDS/PUBLIC ORGANIZATIONS

- County Human Resources Office
- Human Resources Job Line
- State Employment Office (EDD)
- County Department Office
- Human Resources Website
- Other (Specify): _____

Equal Employment Opportunity Questionnaire

The following information is required by various state and federal agencies for employment nondiscrimination purposes. The information provided will be detached from your application by Human Resources and kept separate and confidential.

Male Female

Position Title: _____

Do you (1) have physical or mental impairment which substantially limits one or more of your major life activities; i.e., caring for one's self, performing manual task, walking, seeing, hearing, speaking, breathing, learning, and working; (2) have a record of such impairment, or (3) are regarded as having such impairment? Yes No

RACE/ETHNIC IDENTIFICATION: (Check One)

- 1. WHITE. (Not of Hispanic Origin) persons having origin in any of the original peoples of Europe, North Africa or the Middle East.
 - 2. BLACK. (Not of Hispanic Origin) persons having origins in any of the Black racial groups in Africa.
 - 3. HISPANIC. Persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
 - 4. ASIAN OR PACIFIC ISLANDERS. Persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This includes China, Japan, Korea, the Philippine Islands and Samoa.
 - 5. AMERICAN INDIAN OR ALASKAN NATIVE. Persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
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