

City of Montclair Employment Application 5111 Benito St. Mailing Address: P.O. Box 2308 Montclair, CA 91763 909-625-9407

INSTRUCTIONS: This application must be completely filled out and signed to be accepted. PLEASE TYPE OR PRINT RESPONSES.

		First	N	И.І.
		Street		
	CELL	State PHONE:		ZIP Code
	-			
ieets any legal requi	rements for the	applicable position.)	YES	NO
d California Driv	ver License?		YES	NO
-	ity of Monte	lair?		_
	TEM (CalPH	ERS) MEMBER:		□ NO □ NO
			Veekend	
				nnaire for
		y in each language.	YES	□ NO
1 2 3 4 Na) 🗌 G.E.D
urse of Semester		Hours of Training, Program, o	or Course(s)	Date Completed
	neets any legal requi d California Driv ty of Montclair? ty of Montclair? vorking for the C REMENT SYST ? U WILL ACCE Shift Work ND POSITIONS ole at www.cityoff read, and write E erbal, reading, and 9 10 11 12 Di 1 2 3 4 Na 5 6 7 8 Major Complete Vajor Complete	neets any legal requirements for the descent of the clip of Montclair? ty of Montclair? working for the City of Montclair? working for the City of Montclair? REMENT SYSTEM (CalPH ? UWILL ACCEPT (Check Shift Work Day ND POSITIONS WORKING ole at www.cityofmontclair.org read, and write English? erbal, reading, and writing ability 9 10 11 12 Did you received 1 2 3 4 Name, City, and 5 6 7 8 Major Completed Number of Day	Street State CELL PHONE:	Street State CELL PHONE: neets any legal requirements for the applicable position.) YES d California Driver License? yey of Montclair? YES working for the City of Montclair? YES REMENT SYSTEM (CalPERS) MEMBER: YES ? UWILL ACCEPT (Check all that apply): Shift Work Day Evening ND POSITIONS WORKING WITH CHILDREN: Supplemental Question read, and write English? read, and write English? 9 10 11 12 Did you receive a high school diploma/G.E.D? YES 9 10 11 12 Did you receive a high school diploma/G.E.D? YES 9 10 11 12 Did you receive a high school diploma/G.E.D? YES Major Completed Number of Hours of Training, Program, or Course(s)

Current certificates of professional competence, licenses, and membership in professional associations:

EMPLOYMENT HISTORY: List your complete employment history for the last 10 years. Begin with your most recent experience. List all jobs separately. A resume will not substitute for the information required in this section. Attach additional sheet if needed.

FROM: MO DAY YR TO: MO DAY YR HOURS/WEEK: No. OF PEOPLE SUPERVISED:	TITLE: DUTIES: MAY WE CONTACT CURRENT EMPLOYER? YES NO	PRESENT OR MOST RECENT EMPLOYER: ADDRESS: PHONE: SUPERVISOR: REASON FOR LEAVING:
FROM: MO DAY YR TO: MO DAY YR HOURS/WEEK: No. OF PEOPLE SUPERVISED:	TITLE: DUTIES:	PRESENT OR MOST RECENT EMPLOYER:
FROM: MO. DAY YR. TO: MO. DAY YR. HOURS/WEEK: YR. No. OF PEOPLE SUPERVISED:	TITLE: DUTIES:	PRESENT OR MOST RECENT EMPLOYER:
FROM: MO DAY YR TO: MO DAY YR HOURS/WEEK: No. OF PEOPLE SUPERVISED:	TITLE: DUTIES:	PRESENT OR MOST RECENT EMPLOYER:

RESIDENCE HISTORY: Please list all of your residences during the last five (5) years starting with your most current residence. For purposes of this question, a "residence" is any place you have lived, stayed, or slept for 30 or more days. Although your license or voter registration may have remained unchanged for the last five (5) years, your residence may be different if, for example, you served in the military, attended college, or for any other reason. Attach additional sheet if needed.

DATES: FROM:	STREET ADDRESS		
то:	СІТУ	STATE	ZIP
DATES: FROM:	STREET ADDRESS		
TO:	СІТҮ	STATE	ZIP

COMMENTS (if any): _

ALL OFFERS OF EMPLOYMENT ARE CONDITIONED ON A CANDIDATE ESTABLISHING ELIGIBILITY TO WORK IN THE U.S. AND SUCCESSFULLY PASSING A PHYSICAL/MEDICAL EXAM, DRUG SCREENING, AND BACKGROUND INVESTIGATION.

THE JOB FLYER CORRESPONDING TO THE POSITION FOR WHICH YOU HAVE APPLIED LISTS THE ESSENTIAL FUNCTIONS OF THE POSITION. CAN YOU PERFORM EACH OF THESE FUNCTIONS WITH OR WITHOUT REASONABLE ACCOMMODATIONS?

Do you have the legal right to work in the U.S.? YES NO (Proof of eligibility to work in the United States will be required upon offer of employment.)

I hereby authorize my former employers, references, or any other person to furnish the City of Montclair with information regarding my employment, job performance, reason for leaving employment, and any other information pertinent to my performance and tenure. I hereby release any of my former employers, their agents, or any other references from all liability for damages whatsoever in furnishing said information. I hereby authorize the City of Montclair and/or its agents to conduct a background investigation of my employment, education, criminal, and personal history. I hereby authorize the City of Montclair to receive and review the results of my preemployment drug screening, medical exam, and, if applicable, psychological exam. I hereby certify that all statements on this application are true and complete and that any misstatement or omission of material facts may subject me to immediate disqualification or dismissal.

SIGNATURE:

DATE:

THE CITY OF MONTCLAIR IS AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF: Race, Religious Creed, Color, National Origin, Ancestry, Sex, Age, Marital Status, Physical Condition, Handicap, Sexual Orientation, or Disability in Employment or the Provision of Services.

AFFIRMATIVE ACTION SURVEY

The following information is voluntary and will not be used in any way in the selection process. Your cooperation in providing this information is appreciated.

Position for which	ch you are applying		
<u>Ethnic Origin</u> :	Asian	can American iian or Other Pacific Islander	 Hispanic or Latino American Indian or Alaskan Native Two or More Races
<u>Gender</u> :	Male	Female	
		RECRUITMENT S	SURVEY
How did you FIF	RST learn about the	e job posting for which you ap	oplied?
Government. ZipRecruiter CalJobs.ca.g City of Mont	c.com ov	GovtJobs.com CalJobsAvailable.com InlandEmpire.craigslist oct this <i>only</i> if you went direct	.org ly to the City website FIRST)
Other websitEmployee	e (please specify):		
Other:			

NOTICE TO APPLICANTS

VETERANS' PREFERENCE SYSTEM IN SELECTION PROCESS

The City of Montclair has implemented a Veterans' Preference System. If you are a veteran who served active duty in the U.S. Armed Forces for a period of at least 24 continuous months and received an honorable discharge, you are eligible. Reserve and inactive service time does not count toward the required 24 months of continuous active duty.

To be considered for veterans' preference status, a certified copy of your most recent DD-214 form, or an acceptable equivalent, must be submitted with your completed and signed City application, on or before the final filing date for the recruitment. PLEASE NOTE: VETERANS' PREFERENCE STATUS MUST BE ESTABLISHED FOR EACH CITY POSITION FOR WHICH YOU APPLY.

If you meet the minimum qualifications established for a City position, receive a passing score in each testing phase of the recruitment process, and qualify for veterans' preference status, the City will apply an additional 10 points to your final examination score. Your final score is used to determine your placement on a certified eligibility list.