

## City of Montclair Employment Application

5111 Benito St.

Mailing Address: P.O. Box 2308 Montclair, CA 91763 909-625-9407

FOR OFFICE USE ONLY
Date Received:
Received By:

INSTRUCTIONS: This application must be POSITION TITLE:	completely	filled out	and signed t	to be accepted. PLEASE	TYPE OR PRINT RES	SPONSES.
NAME:						
Last				First		M.I.
MAILING ADDRESS:						
Number				Street		
HOME PHONE:			CELL	State PHONE:		ZIP Code
E-MAIL ADDRESS:						
<b>AGE:</b> (Employment is subject to verification that your Are you 18 years of age or older?	age meets any	legal require	ements for the	applicable position.)	☐ YES	NO NO
DRIVER LICENSE: Do you have a current valid California Driver License?					☐ YES	NO
CITY EMPLOYMENT:					_	
1. Are you a current or past employee of the City of Montclair?  If "YES," what department?				☐ YES	NO NO	
2. Do you have any family members currently working for the City of Montclair?  If "YES," what department?				☐ YES	NO NO	
CALIFORNIA PUBLIC EMPLOYEES RETIREMENT SYSTEM (CalPERS) MEMBER:  1. Are you a past/current member of CalPERS?  2. Are you a CalPERS retired annuitant?     If "YES", what is the date of your retirement?					☐ YES ☐ YES	=
TYPE OF EMPLOYMENT AND HOURS  Full Time Part Time				all that apply):  Bvening Night	: Weekend	
APPLICATIONS FOR POLICE OFFICE Police or Recreation & Learning required (av						nnaire for
LANGUAGE SKILLS: Do you fluently spe List any other languages you speak and indicate you				y in each language.	☐ YES	NO NO
EDUCATION AND TRAINING: Circle highest grade completed: High Schoo College Post-Gradua	1 2	3 4 Nar		e a high school diploma d State of high school a	/G.E.D?  YES  NO	)
Name and Location of College, University, Business, Correspondence, Trade, or Service School(s)	Major Course of Study	Completed Semester Units	Quarter Units	Hours of Training, F	egree Received; Number of Program, or Course(s) b Announcement	Date Completed

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

YES 
NO 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.

#### 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 you are applying:						
Ethnic Origin:  White Black or African American Asian Native Hawaiian or Other Pacific Islander	Hispanic or Latino American Indian or Alaskan Native Two or More Races					
Gender:						
RECRUITMENT SURVEY						
How did you FIRST learn about the job posting for which you applied?						
☐ GovernmentJobs.com       ☐ GovtJobs.com         ☐ ZipRecruiter.com       ☐ CalJobsAvailable.com         ☐ CalJobs.ca.gov       ☐ InlandEmpire.craigslist.org         ☐ City of Montclair website (Select this only if you went directly to the City website FIRST)						
<ul><li>Other website (please specify):</li><li>Employee</li></ul>						
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.

### SUPPLEMENTAL QUESTIONNAIRE FOR CRIMINAL CONVICTIONS RECREATION & LEARNING POSITIONS

**CONVICTIONS:** Have you ever been convicted of a crime – including a plea of guilty or no contest – which resulted in a criminal conviction, and has not been judicially ordered sealed or expunged? You may exclude minor traffic violations or possession of marijuana convictions which precede the date of your application and signature by two years.

If "yes," please briefly explain below the nature of the crime(s), the date, and the place of the conviction(s). (Convictions are evaluated for each position and are not necessarily disqualifying; however, not truthfully identifying a conviction is grounds for disqualification.) | YES | NO Position Title: Candidate Name: (Please Print)

(Date)

Candidate Signature: