



# CITY OF BALDWIN PARK EMPLOYMENT APPLICATION

Equal Opportunity Employer

Human Resources Department  
14403 East Pacific Avenue  
Baldwin Park, CA 91706  
Tel: (626) 813-5207  
Fax: (626)813-5287

<b>Position Applied For:</b>
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**INSTRUCTIONS:** This application is part of your total evaluation. Answer all questions completely. False statements, omission of facts, or incomplete applications may result in rejection of your application, removal from eligibility list, or dismissal. **This application must be signed to be accepted for review. Please type or print legibly in black or blue ink.**

### BACKGROUND INFORMATION

LAST NAME	FIRST NAME	MI
ADDRESS	APT#	CITY STATE ZIPCODE
PHONE #	2 <sup>ND</sup> PHONE	EMAIL ADDRESS SOCIAL SECURITY # (voluntary)
ID. CARD/DRIVERS LICENSE NUMBER	STATE	EXPIRATION DATE CLASS

**YES   NO**

- Have you ever been employed with the City of Baldwin Park? If yes, list dates below
- Do you have any relatives currently working for the City of Baldwin Park? If yes, list below
- Have you ever been discharged or forced to resign from any position because of misconduct or unsatisfactory performance? If yes, explain below
- Can you provide a birth certificate, proof of U.S. Citizenship, or other documentation to establish your right to work in this country? If no, explain below
- If employed, will you take a Loyalty Oath of Public Officers and Employees? If no, explain below.
- Are you over the age of 18? If not attach a work permit and list DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_
- Sworn Positions: Are you over the age of 21? If not list DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Explanation to Question(s):** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### EDUCATION

Check highest grade completed: 9 10 11 12 GED   College:  1 2 3  4  5  6  7  8+

Name and Location of high school \_\_\_\_\_

College/University	Degree/Major	Dates Attended	Units	Date Graduated

**Do you speak any language other than English? If so, please list:** \_\_\_\_\_  
 Speak    Read    Write

**HOW DID YOU FIND OUT ABOUT THIS JOB OPPORTUNITY? CHECK ALL THAT APPLY**

<input type="checkbox"/> Job Flyer	<input type="checkbox"/> Trade Publication	<input type="checkbox"/> Friend	<input type="checkbox"/> City Website	<input type="checkbox"/> Other

### SEE REVERSE SIDE

HR Use Only Received By: _____ Date: _____ Confirmation # _____ Acc _____ Rej _____
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**EMPLOYMENT HISTORY**

**MUST BE FILLED OUT COMPLETELY.** List your present or most recent job first. List all jobs, including military service, self-employment, and any periods of unemployment in the last ten years. Also list any volunteer experience which you feel helps you meet the requirements for the job. Resumes may be submitted in addition to your application, but the information below must be completed. **Resumes will not be accepted in place of a completed application. If necessary, attach another sheet to list all employment in the last ten years.**

<b>Dates of Employment:</b>		<b>Job Title:</b>	
<b>Name and Address of Employer:</b>		<b>Duties Performed:</b>	
Phone No:			
<b>Final Salary:</b>		<b>Supervisor's Name and Title:</b>	<b>May we contact?</b>
<b>Hours per week:</b>	<b>No. Supervised:</b>	<b>Reason for leaving/considering change:</b>	

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I hereby certify that all statements made in this application are true and correct. I understand my employment is conditional upon me passing a medical examination, satisfactory reference check, and fingerprinting subject to Labor Code Section 1051. I understand that if I am employed by the City, I will be employed on a probationary period. I understand that once I have successfully completed the probationary period, I may be dismissed for cause pursuant to the rules and procedures set forth in the City's Personnel Rules.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_