



EMPLOYMENT APPLICATION

Human Resources
 701 Laurel Street, Menlo Park, CA 94025
 ph 650-330-6670 f 650-327-5382

Position for which you are applying:			
If hired, can you provide evidence that you are legally authorized to work in the U.S. without immigration sponsorship by the City of Menlo Park? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Salary Desired:		Date Available:	
Name (First, Middle, Last):			
Phone:		Alternative Phone:	
Address:		City:	State: Zip:
Email:			
Driver's License #:	Class:	Expiration Date:	State:
Have you ever applied for a position with the City of Menlo Park? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, when?		What position?	
Have you ever been a member of the Public Employees Retirement System (PERS) of the State of California? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you related to a current employee with the City of Menlo Park? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, who and what department?			
Have you ever used another name? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate name(s):			
Can you perform the essential functions of the position for which you are applying, either with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No			
How were you referred? (Name of website, friend, newspaper, etc):			
Education Circle Highest Grade Completed: 8 9 10 11 12		College 1 2 3 4	Grad Work? <input type="checkbox"/> Yes <input type="checkbox"/> No
High School Name and Location of School:			Graduate: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> GED
College/Business/Trade School	Degree	Major	Semester Units
Licenses, certificates, or other credentials (State, Professional, etc., which are required by this position):			
Name of license/certificate, number:			Expiration Date:
Name of license/certificate, number:			Expiration Date:

Experience: List all jobs in the last ten years that you feel are related to the job you are seeking. Be specific in describing these jobs. Be sure to list each change in title or promotion separately. If qualifying experiences are part-time, be sure to list the number of hours per week spent in doing the work. You may use additional sheets, if necessary. Begin with your present job. Please complete all sections.

Dates		Employers' Name, Address, Phone Number	Title and Duties Performed	Reason for Leaving
From:	To:			
Total:	Yrs Mos			
Salary:				
Supervisor Name:				
From:	To:			
Total:	Yrs Mos			
Salary:				
Supervisor Name:				
From:	To:			
Total:	Yrs Mos			
Salary:				
Supervisor Name:				
From:	To:			
Total:	Yrs Mos			
Salary:				
Supervisor Name:				

References: Please give us the names, business addresses and phone numbers of individuals who have knowledge of your technical competence in the field for which you are applying, and whom we may contact for checking references and academic records.

Name	Address	Phone

CERTIFICATE OF APPLICANT: I hereby certify that all statements made in this application and accompanying materials are true and I agree and understand that any misstatement or omission of material fact will disqualify me from potential employment with the City of Menlo Park. I authorize the release of information necessary to verify the statements made in this application and/or accompanying materials, and release the City of Menlo Park, its employees, officers and agents from all liability in connection with the release/or receipt of information. If offered a position, I further agree to submit to a job-related medical examination by an authorized City physician, as a condition of employment. I further agree to be fingerprinted and to furnish proof of either citizenship or the legal right to work in the U.S.

Signature

Date