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1351 Rollins Rd **Burlingame CA 94010** (650) 344-8592 • Fax (650) 344-3843 www.smcmvcd.org

EMPLOVMENT APPLICATION

	EMPLOYMENT APPLICATION	<u>District Use Only</u>
		Received On:
Po	sition Applied For:	Interviewed On:
IN	STRUCTIONS: Answer all questions using dark ink.	
1.		
2.	Street Address:	
	City: State: _	Zip:
3.	Daytime Telephone: () Email:	
4.	Do you possess a valid California driver's license: Yes No	
	License Number: Expiration Date:	
5.	Are you 18 years or older? Yes No (If under 18 a work pe	ermit is required by state/federal law
6.	If you are not a U.S. Citizen, do you have the legal right to work in the United	States? Yes No
7.	Have you ever served in the military service of the U.S.? Yes No If yes, which branch?	
8.	List areas of special interest or abilities:	

9.	Education: Circle highest school grade completed:						
		6 7 8 9	10 11	12			
		Have you graduated from	high school: Yes	No			
		If no, do you have a GED	Certificate: Yes	No			
Un	iversity/College	Course of Study or Major	Minor	Years Completed	Units, Hours, Degrees		
A							
В							
С							
10.	* *	eship, trade, vocational, bus s, whether completed and ar	•	er special training you have h	ad. Include type, where		
11. List any special skills or experience r			ant to the job applied fo	r (e.g. operating machinery, e	etc.):		
12.	Are you fluent in any language(s) other than English? If so, please specify your languages and abilities:						
	Understand	Spea	k	Write	Read		
13.	Local References: Give names and addresses of persons other than relatives or former employers.						
	NAMI	Ξ	ADDRESS	TELEPI	HONE		
14.		available to start employme					
15.	Specify any ho	ours or days you cannot or v	vill not work:				
16.	Can you perform the essential requirements of the positions for which you are applying, with or without reasonable						
	accommodatio	n? Yes No	0				
	(Note: The District complies with the ADA and state law and considers reasonable accommodation measures that may be necessary for eligible applicants and employees to perform essential functions.)						

Begin with your present job and list in reverse order. Include self-employment or any periods of unemployment in excess of one month. List any promotions as a separate job.

Dates Employed	Job Title:	Name of Employer:		
From:	Duties/Responsibilities:	Address:		
To:		Phone: Supervisor Name/Title:		
		Reason for leaving:		
Dates Employed	Job Title:	Name of Employer:		
From:	Duties/Responsibilities:	Address:		
То:		Phone:		
		Supervisor Name/Title:		
		Reason for leaving:		
D . E . 1	l v v min	LN GF 1		
Dates Employed	Job Title:	Name of Employer:		
From:	Duties/Responsibilities:	Address:		
To:		Phone:		
		Supervisor Name/Title:		
		Reason for leaving:		
Dates Employed	Job Title:	Name of Employer:		
From:	Duties/Responsibilities:	Address:		
То:		Phone:		
		Supervisor Name/Title:		
		Reason for leaving:		
State any additional info	ormation you feel may be helpful in considering	your application:		

riease read carefuny, initial each paragraph and sign below
I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed.
I hereby authorize the District to thoroughly investigate my references, work record, education and other matters related to my suitability for employment.
I hereby authorize the District to allow potential screening, procedures and/or the procurement and investigation of records including but not limited to the categories of immigration status, military discharge, criminal record, drug testin (mandatory for safety-sensitive positions such as jobs requiring driving a motor vehicle or operating machinery), physical exams, fingerprinting, department of motor vehicle records, educational transcripts and credit history for positions in the Finance Department. Any additional areas of screening and investigation that may become necessary must be disclosed by the District and agreed to by the candidate in writing. Refusal by me to allow any screening or investigation required by the District in accordance with this policy shall constitute a basis to discontinue the employment application process.
I understand that nothing in the application, or conveyed during any interview for employment, or conveyed at any time during my employment, if hired, is intended to create an employment contract between the District and me. In addition I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the District, and that no promises or representations contrary to the foregoing are binding on the District unless made in writing and signed by me and the District's authorized representative.
I understand and agree that my employment with the San Mateo County MVCD is for no specific period of time and may be terminated by either party.
I certify that the information contained in this application and any attachments I provide is correct and complete to the best of my knowledge. I agree to have any of the statements checked by the company. I authorize my references and supervisors, past and present, to provide information concerning my employment history. I release all parties from any and all liability for damages that may result from furnishing such information, as well as from the use of or disclosure of such information by the District or its agents. I understand that any misrepresentations or material omissions may result in my failure to receive an offer or, if I am hired, in my dismissal.
Signature: Date:

Revised: July 19, 2021

Reviewed by Legal Counsel: July 16, 2021