

Employment Application

City of Agoura Hills

30001 Ladyface Court Agoura Hills, CA 91301 Phone (818) 597-7300 Fax (818) 597-7341

THE CITY OF AGOURA HILLS IS AN EQUAL OPPORTUNITY EMPLOYER. Type or print using black or dark blue ink. This application must be completed in full. A separate application must be completed for each position. All statements are subject to verification. If you move, you must notify the Personnel Department in writing of your new address and phone number

Exact title and posi	ition for which your a	re appling for:			
Last Name	First Name	Middle	Email Address		() Home telephone number
Street Number and S	treet Name	(or P.O. Box)			() Business telephone number
City		State	Zip Code		() Cell Phone
Do you possess a val		Yes		ase complete the fo	-
Issuing State Language		License Number: al Language Skills Language	Expira	tion Date: Office skills	Class: (computer / computer program)
Speak Write Translate		Speak Write Translate			
High School		if you possess one of the f	College (1	st grade completed thru 4 years) late work (years)	(1 thru 12)
Colleges, Universit	ies, Vocational, Techini ols Attended	cal City/State	Major or Course of Study	Total Units Comp	Degree or Certificate Degree or Certificate
Title and number of license, certificates or credential relevant to this pos Title: Number:		sition. Attach a copy of ar Issued By:	-	ration. spiration date:	
		vides employment rights and no			blished in the American with Manager's Office at (818) 597-7304.

Applicant Name	Position you are applying for:					
	EMPL	OYMEN	T HIS	ГORY		
	all experience, including	volunteer and	military. A	dditional sheet	of a completed application form. Respond completely is may be attached to this application, if necessary to fully e a copy of your completed application form and	
Business agency name and address	Dates employed: From:			Job Title: # of people supervised:		
	To: Total:	Years		Months	Duties:	
Phone:	Hours (per wk)	•				
Supervisor's name: May we contact your employer? Yes No					Reason for leaving:	
Business agency name and address	Dates employe From:	ed:			Job Title: # of people supervised:	
	To: Total:	Years		Months	Duties:	
Phone:	Hours (per wk)			TVIOITIIS		
Supervisor's name: May we contact your employer? Yes No					Reason for leaving:	
Business agency name and address	Dates employe	ed:			Job Title: # of people supervised:	
	To: Total:	Years		Months	Duties:	
Phone:	Hours (per wk)			Wionins		
Supervisor's name:						
May we contact your employer? Yes No					Reason for leaving:	
Business agency name and address	Dates employe	ed:			Job Title:	
	From: To:	-			# of people supervised: Duties:	
	Total:	Years		Months	-	
Phone:	Hours (per wk)	•		•		
Supervisor's name:						
May we contact your employer? Yes No					Reason for leaving:	
Business agency name and address	Dates employe	ed:			Job Title:	
	From: To:				# of people supervised: Duties:	
Discussion	Total: Hours (per wk)	Years		Months		
Phone:Supervisor's name:	Trours (per wk)					
May we contact your employer?					Reason for leaving:	
Yes No						
Additional Information: You may includ	1	1 (.1	analificati	ion fon this n	ogition	

Amuliaant Nama			Desition non one ambring for				
Applicant Name:		ı	Position you are applying for:				
	EMPLOYMENT APPLICATION NOTICES						
	Please read carefully, 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 on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.						
	I hereby authorize the City of Agoura Hills to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the City of Agoura Hills any and all letters, reports and other information related to my work records (with the exception of salary history), without giving me prior notice of such disclosure. In addition I hereby release my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure						
	Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial or outstanding judgment) be conducted by internal personnel employed by the City of Agoura Hills, I am entitled such public records obtained by the City of Agoura Hills unless I mark the check box below. If I am not hired as information, I am entitled to a copy of any such records even though I have checked the box below.						
	I waive receipt of a copy of any public record described in the paragraph above.						
	I understand that if I am determined to meet the minimum qualifications for the position and am selected to participate interview process of the recruitment, I may be required to complete a supplementary questionnaire regarding my convinistory. No applicant will be denied employment solely on the basis of conviction of a criminal offense, except as required law. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense position applied for may, however, be considered. Some applicants may be required to be fingerprinted.						
	•	with federal law, all persons hired will be required to verify identity and eligibility to work in the United States te the required employment eligibility verification document form upon hire.					
	Date		Applicants signature				