CITY OF CUDAHY

5220 Santa Ana Street
Cudahy, CA 90201

Phone (323) 773-5143
Email: jhernandez@cityofcudahyca.gov

Application for Employment

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, gender, sexual orientation, religion, national origin, or other protected classifications. The City of Cudahy is an Equal Opportunity Employer.

This application will be rejected if all spaces are not completed. Resumes may be submitted as attachments, however, not in lieu of completing the application. Please print and use ink, computer or typewriter.

Position Applied For _____ Date _____

Name_____

Address_____
Street City State Zip

Telephone Number_____ Are you over 18 years of age? ☐ Yes ☐ No

How did you learn of this opening?_____

Have you worked here before? ☐ Yes ☐ No If "yes", when and what position? _____

_____

Have you seen a copy of the job description listing the essential functions of the job? ☐ Yes ☐ No

Can you perform these essential functions with or without reasonable accommodation? ☐ Yes ☐ No

Are there any hours, shifts or days you <u>cannot or will not</u> work? ☐ Yes ☐ No

If "yes", please explain _____

_____

_____

Are you willing to work overtime as required? ☐ Yes ☐ No

Have you ever been a member of the CalPERS Retirement System? ☐ Yes ☐ No

If "yes", please provide the name(s) of employers and dates: _____

_____

Do you have any relatives currently working for the City of Cudahy? ☐ Yes ☐ No

If "yes", please provide the name(s), and department(s) as well as relationship (e.g. father, sister, cousin, etc.). The City must consider the Nepotism policy related to the employment of relatives.

_____

_____

EDUCATION

EDUCATION	NAME/LOCATION OF SCHOOL	MAJOR	LIST DIPLOMA/G.E.D. COLLEGE UNITS COMPLETED OR DEGREE EARNED
High School			
College/University			
College/University			

Other Training/Education/Certificates (Please attach copies of certificates)

_____

_____

_____

WORK HISTORY (Last 10 years)

May we contact your present employer? ☐ Yes ☐ No

Most Recent Employer: _____ Telephone: _____

Address:

_____

Street City State Zip

Date Employment Began _____ Date Employment Ended_____

Beginning Position_____ Beginning Salary: $_____

Position on Leaving _____ Ending Salary: $_____

_____

Name and Title of Supervisor_____

Description of Duties_____

Reason for Leaving (or looking for other employment)_____

Previous Employer: _____ Telephone: _____

Address:

_____

Street City State Zip

Date Employment Began _____ Date Employment Ended_____

Beginning Position_____ Beginning Salary: $_____

Position on Leaving _____ Ending Salary: $_____

_____

Name and Title of Supervisor_____

Description of Duties_____

Reason for Leaving (or looking for other employment) _____

Previous Employer: _____ Telephone: _____

Address:

_____

Street City State Zip

Date Employment Began _____ Date Employment Ended_____

Beginning Position_____ Beginning Salary: $_____

Position on Leaving _____ Ending Salary: $_____

_____

Name and Title of Supervisor_____

Description of Duties_____

Reason for Leaving (or looking for other employment) _____

Previous Employer: _____ Telephone: _____

Address:

_____

Street City State Zip

Date Employment Began _____ Date Employment Ended_____

Beginning Position_____ Beginning Salary: $_____

Position on Leaving _____ Ending Salary: $_____

_____

Name and Title of Supervisor_____

Description of Duties_____

Reason for Leaving (or looking for other employment) _____

Previous Employer: _____ Telephone: _____

Address:

_____

Street City State Zip

Date Employment Began _____ Date Employment Ended_____

Beginning Position_____ Beginning Salary: $_____

Position on Leaving _____ Ending Salary: $_____

_____

Name and Title of Supervisor_____

Description of Duties_____

Reason for Leaving (or looking for other employment) _____

APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that the facts I provided in the Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the City of Cudahy to make an investigation of any of the facts set forth in this Application for Employment. I also acknowledge my understanding that the City of Cudahy is an at-will employer for non-represented positions, including temporary, seasonal, part-time, and hourly positions. As such, any aforementioned at-will positions with the City may be terminated at any time, with or without cause. I am also aware the City will conduct a background check prior to job offer, and that the successful candidate will be required to pass a post-offer job-related physical exam which includes drug and alcohol screening based on the job responsibilities, as a condition of employment and prior to beginning employment.

Applicant's Signature_____ Date_____

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Application for Employment
Verification of Application

Please Read Carefully, Initial Each Paragraph and Sign and Initial Below

Is there any information relative to a name change, assumed name, or nickname necessary for verification of work and education record? □ *Yes* □ *No*

If "Yes", please explain:

_____

_____

_____

_____ 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.

Have you ever been convicted of a felony? □ Yes □ No
(Conviction will not necessarily disqualify an applicant for employment.)

If "yes", describe conditions:

_____

_____

_____

_____ I hereby authorize the City of Cudahy to thoroughly investigate my references, work record, education, previous DOT controlled substances and alcohol tests results, per 49CFR, 382.413 (if applicable) and other matters related to my suitability for employment and further, authorize the references I have listed to disclose to the City of Cudahy any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the City of Cudahy, 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.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the City of Cudahy.

_____ In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

Applicant's Signature: _____

Applicant's Printed Name: _____ Date:_____