

Application For Employment



We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related mental or physical disability, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
How did you learn about us?	
Advertisement	Friend
Employment Agency	Relative
	Walk-In
	Other _____

Last Name	First Name	Middle Name
Address	Number	Street
		City
		State
		Zip
Telephone Number(s)	Day	Evening
Email Address		

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

If yes, give date _____

Have you ever been employed with us before? Yes No

If yes, give date _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you legally eligible for employment in the United States? Yes No

Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? _____

Are you currently available to work: Full Time Part Time Temporary

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

- WE ARE AN EQUAL OPPORTUNITY EMPLOYER -

Education

	Name and Location	Graduate/Degree	Major/Subjects of Study
High School			
College or University			
Specialized Training or Trade School			
Other Education			

*Education beyond the requirements on the job description or not related to the job for which you are applying need not be listed.

Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above-mentioned position.

Indicate any languages, other than English, that you can speak, read and/or write.			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities which relate to the job for which you are applying. You may exclude organizations which indicate race, color, religion, gender, national origin, mental or physical disability or other protected status.

1.	Employer	Dates Employed		Work Performed
		From	To	
	Telephone Number(s)			
	Address			
	Job Title	Supervisor		
	Reason for Leaving			
2.	Employer	Dates Employed		Work Performed
		From	To	
	Telephone Number(s)			
	Address			
	Job Title	Supervisor		
	Reason for Leaving			
3.	Employer	Dates Employed		Work Performed
		From	To	
	Telephone Number(s)			
	Address			
	Job Title	Supervisor		
	Reason for Leaving			
4.	Employer	Dates Employed		Work Performed
		From	To	
	Telephone Number(s)			
	Address			
	Job Title	Supervisor		
	Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

References

Give name, address and telephone number of three business references who are not related to you.

	Name	Address	Phone Number	Relationship
1.				
2.				
3.				

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand and acknowledge that the policy of the CID is such that the existence of a criminal conviction will not necessarily disqualify my application for employment.

I understand that if offered employment, the offer may be contingent on passing a pre-employment alcohol and drug screen and a pre-employment physical and voluntarily agree to submit to these procedures. I also understand that I will be required to submit proof of my identity and legal right to work in the United States on my first day of employment.

If the position applied for requires driving in the course of work, I understand that I will be required to possess a current and valid California driver's license and understand that I will be required to provide a copy of my official driving record and proof of insurance.

This application for employment shall be considered active for a period of time not to exceed one year. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I understand and hereby acknowledge that any employment relationship with CID is of an "at will" nature, which means that the employee may resign at any time and the CID may discharge the employee at any time with or without cause. I also understand that this "at will" employment relationship may not be changed by any written document or by conduct, unless such change is specifically acknowledged in writing by an authorized executive of the CID.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the CID.

Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the CID, I am entitled to copies of any such records obtained, unless I mark the checked box below. If I am not hired as a result of such 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.

Signature of Applicant: _____

Date: _____