



Ventura Regional Sanitation District
 1001 Partridge Drive, Suite 150 – Ventura, CA 93003-0704
 Telephone: (805) 658-4638 Job Line: (805) 658-4663

For Office Use Only

EMPLOYMENT APPLICATION

(Equal Opportunity Employer – Drug Free Workplace)

Title of position for which you are applying: _____ Date: _____

INSTRUCTIONS: This application is part of the selection process. Please type or print all answers accurately and legibly in dark ink. If you need additional space, or wish to provide additional pertinent information, please attach extra sheets. Please provide all information requested; **do not substitute a resume.**

Applicants may request accommodation to participate in the application process by contacting the Human Resources Office at (805) 658-4638 or by contacting the California Relay Service for the hearing impaired TDD line at 1-800-735-2929.

1. Complete Name (Last, First, Middle) _____ 2. Social Security Number _____

3. Complete Mailing Address _____
 Street: _____
 City: _____ State: _____ Zip: _____
 4. Home: () _____
 Cell: () _____
 Business: () _____

5. Do you have any relatives who work for the District? Yes No If Yes, please give name(s) and relationship(s): _____

6. If you are under 18, please indicate your age: _____

7. Can you, after employment, submit verification of your legal right to work in the United States? Yes No

8. Have you been convicted of a felony or misdemeanor within the last five years? Yes No
 If yes, please attach on a separate sheet the following information for each offense: (1) date, (2) charge, (3) place, (4) court, and (5) action taken. A conviction will not necessarily disqualify applicant from the job applied for. You may omit convictions for marijuana-related offense that are more than two years old as defined in CA Health & Safety code sections 11357, 11360, 11364, 11365, 11550.

9. Do you have a valid California driver's license? Yes No Has it ever been revoked or suspended? Yes No
 Number: _____ Class: _____ Expiration Date: _____

10. Indicate machine skills, languages, or other special skills or abilities pertinent to this application. For secretarial/clerical positions, include typing and shorthand speeds.

11. Education:

a. Circle highest level completed: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 16+

b. List all educational degrees, professional certificates, or licenses received, if pertinent to this application:

1. School	Degree	Major
2. License/Certificate	Granting Agency	Date Expires

c. List all course work completed which you feel is relevant to this application. (Use additional sheets if necessary or attach approved transcript.)

Course: _____ Institution: _____

d. Please list any activities, achievements or honors which you feel are relevant to this application.

12. **EMPLOYMENT HISTORY:** Starting with your most recent position, list all work experience for the past ten years. Please state if unemployed or in school for any period of time greater than three months. List all military service, volunteer work or specialized training if applicable to the position for which you are applying. Provide all information requested. **(Use additional sheets as necessary to account for the past ten years.)**

Do not substitute a resume or write "see resume." (A resume may be attached as a supplement to this application.)

Most Recent Employer:		Your title:	
Address:		Salary:	
Supervisor:	List Duties:		
May we contact this employer to verify information? <input type="checkbox"/> contact any time <input type="checkbox"/> contact at a later date			
Dates of Employment (mo/yr) From: To:			Work number:
Hours worked per week:			No. of employees supervised:
Reason for leaving:			

Previous Employer:		Your title:	
Address:		Salary:	
Supervisor:	List Duties:		
May we contact this employer to verify information? <input type="checkbox"/> contact any time <input type="checkbox"/> contact at a later date			
Dates of Employment (mo/yr) From: To:			Work number:
Hours worked per week:			No. of employees supervised:
Reason for leaving:			

Previous Employer:		Your title:	
Address:		Salary:	
Supervisor:	List Duties:		
May we contact this employer to verify information? <input type="checkbox"/> contact any time <input type="checkbox"/> contact at a later date			
Dates of Employment (mo/yr) From: To:			Work number:
Hours worked per week:			No. of employees supervised:
Reason for leaving:			

13. **REFERENCES:** Please list three references not listed above with whom you have worked in the past five years.

Name	Title	Company	Daytime Phone
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

I have carefully read this application and any attachment or resume which is attached hereto or which is submitted in support of this application. I declare under penalty of perjury that all information contained in this application and any attachment or resume submitted in support of my application, is true and correct to the best of my knowledge and belief. I understand, acknowledge and agree that any false statement, misstatement or omission of a material fact made in this application or in connection with the application process, is grounds, in the sole and exclusive discretion of the District, for disqualification from further consideration for the position or positions for which I have applied. I also understand, acknowledge and agree that any false statement, misstatement, or omission of fact made in this application, or in connection with the application process, may result in forfeiture of my employment with the District, even if discovered after I have accepted employment with the District.

Signature: _____

Date: _____

VENTURA REGIONAL SANITATION DISTRICT

**EMPLOYMENT QUESTIONNAIRE
(Optional)**

Please complete this form and submit it with your application. The form will be detached from your application and will be kept separate and confidential. This information is being gathered for the purpose of evaluating the effectiveness of our Affirmative Action and advertising efforts. This information will **NOT** be considered in the selection process.

POSITION APPLIED FOR: _____

1. I FIRST LEARNED OF THIS JOB OPENING THROUGH: (check one)

- A friend or relative
- The District's Human Resources Office
- Contact with other District Employee
- Internet – Which website? _____
- An organization or group – Which group? _____
- An advertisement in a newspaper – Which newspaper? _____
- An advertisement in a magazine/periodical – Which magazine/periodical? _____
- Other means (please specify) _____

2. GENDER: (check one) Male Female

3. AGE: _____

4. ETHNIC CATEGORY: (check one)

- "AMERICAN INDIAN OR ALASKAN NATIVE" – Persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
- "ASIAN OR PACIFIC ISLANDERS" – Persons having origins in any of the original peoples of the Far East, Southeast Asia, the India Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, and Samoa.
- "BLACK (not of Hispanic origin)" – Persons having origins in any of the Black racial groups of Africa.
- "FILIPINO" – Persons having origins in any of the original peoples of the Philippine Islands.
- "HISPANIC" – Persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- "WHITE (not of Hispanic origin)" – Persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

5. AMERICANS WITH DISABILITIES ACT (ADA)

Applicants with a disability who require special testing accommodations should contact the Human Resources Office no later than the filing deadline on the job bulletin.