

EXPERIENCE - Begin with your most recent job. List all jobs and any periods of unemployment in the last 10 years. Also list jobs past 10 years, including volunteer work, if the experience helps to qualify you for the position. Include paid or unpaid, full or part-time, military, summer jobs, etc. Please attach additional sheets if necessary. **This section must be fully completed. A resume may be attached, but will not be substituted for completion of this section.**

DATES		EMPLOYER		POSITION	
Starting Date (Mo. & Yr.)		Name of Present or Last Employer		Your Title	
Ending Date (Mo. & Yr.)		Address		Duties	
Total Time Worked Yrs. Mos.		City and State			
Hours Per Week		Supervisor's Name			
Mo. Salary Start \$ End \$		Supervisor's Phone No.		Reason for leaving or wanting to leave:	

Starting Date (Mo. & Yr.)		Name of Present or Last Employer		Your Title	
Ending Date (Mo. & Yr.)		Address		Duties	
Total Time Worked Yrs. Mos.		City and State			
Hours Per Week		Supervisor's Name			
Mo. Salary Start \$ End \$		Supervisor's Phone No.		Reason for leaving or wanting to leave:	

Starting Date (Mo. & Yr.)		Name of Present or Last Employer		Your Title	
Ending Date (Mo. & Yr.)		Address		Duties	
Total Time Worked Yrs. Mos.		City and State			
Hours Per Week		Supervisor's Name			
Mo. Salary Start \$ End \$		Supervisor's Phone No.		Reason for leaving or wanting to leave:	

Starting Date (Mo. & Yr.)		Name of Present or Last Employer		Your Title	
Ending Date (Mo. & Yr.)		Address		Duties	
Total Time Worked Yrs. Mos.		City and State			
Hours Per Week		Supervisor's Name			
Mo. Salary Start \$ End \$		Supervisor's Phone No.		Reason for leaving or wanting to leave:	

PERSONAL REFERENCES — Give the names, home and business address of three persons who have knowledge of your character, experience and ability. Do not give names of relatives or supervisors listed above. Please list any other names by which references would know you: _____

Full Name	Home Address Street Number, City, State	Business Address Street Number, City, State	Business or Occupation	Phone Numbers
				HOME
				WORK
				HOME
				WORK
				HOME
				WORK

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING AS IT CONTAINS IMPORTANT INFORMATION AND A WAIVER AND RELEASE OF LIABILITY: I authorize investigation of all statements in this application for employment as may be necessary in arriving at an employment decision. I understand that I may be requested to submit proof of qualifications at a later date. If upon checking these you determine that I do not meet specific requirements, I understand that I will be disqualified. In order that the City may verify the accuracy of the information contained in my application, I hereby authorize any former or current employer, its employees or representatives, or any person listed as a reference to provide any and all information they deem appropriate regarding my employment and job performance, education or training, disciplinary records, driving record, and criminal history to the City of Escondido and any of its employees, representatives, and agents. I authorize the release of this information regardless of any agreement, instructions or representations I may have previously made to the contrary.

I acknowledge that a criminal conviction may not necessarily disqualify me from employment with the City. According to California Civil Code §1786.53, in the event the City, for employment purposes, receives any public records of arrests, indictments, convictions, civil judicial actions, tax liens, or outstanding judgments pertaining to me (**check one**):

- I do not wish to receive a copy of the public records. I do wish to receive a copy of the public records and I understand they will be provided to me within 7 days after they are obtained.

In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights and claims I may have and release any current or former employer, its employees and representatives, former educational institution, or any person listed as a reference from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of such information by any person or party, whether such information is favorable or unfavorable to me. I further agree that a photocopy of this authorization may be used in lieu of the original for the purposes stated above. All answers and statements in this document are true and complete to the best of my knowledge and belief. I understand that untruthful or misleading answers are cause for rejection of my application, removal of my name from an eligibility list or my dismissal from employment.

Signature _____

Date _____

APPLICANT TRACKING SHEET

Completion of this form is voluntary. The data will be used solely for research and statistical purposes and in no way affects any employment decision. In accordance with state law, the form will be separated from your employment application immediately upon receipt, and the information contained will not be made available to any personnel involved in the hiring process. Your cooperation in answering all the questions completely and accurately is appreciated.

Name _____
 (Last) (First) (Middle)

Address _____

City _____
 (State) (Zip)

Position Applied For _____

Date _____

ETHNIC GROUP: (check one)

- White (Not of Hispanic origin – includes Indo-European, Pakistani and East Indian).
- Black (Includes African, Jamaican, Trinidadian and West Indian).
- Hispanic (Includes Mexican, Puerto Rican, Cuban, Central or South American and Spanish).
- Asian or Pacific Islander (Includes person of the Far East, South East, Asia, the Indian Sub-Continent or the Pacific Islands).
- American Indian or Alaskan Native (Includes persons who identify themselves or are known as such by virtue of tribal association or are Aleuts or Eskimos).
- Other

Sex: Female Male

BIRTHDATE _____

DISABILITY STATUS (if applicable, please check appropriate box)

- Visual Impairment
- Hearing Impairment
- Speech Impairment
- Physical Disability
- Emotional Impairment
- Developmental Disabilities
- Other, please specify

APPLICANT TRACKING SHEET
 (continued)

PERSONNEL INFORMATION:

I heard about this job from: (check one)

- City of Escondido Human Resources Department
- City of Escondido Website
- Craigslist
- Escondido City Employee
- Job Announcement
- Job Line
- Jobs Available
- LinkedIn.com
- Monster.com
- Newspaper Advertisement
 Name of Newspaper: _____
- Notified by City Interest Card
- Other: (Please specify) _____

PLEASE RATE YOUR EXPERIENCE WITH HUMAN RESOURCES BY GIVING US YOUR COMMENTS / SUGGESTIONS, PLEASE CIRCLE ONLY ONE NUMBER.

1 = Poor / Strongly Disagree; 5 = Excellent / Strongly Agree; N/A = Not Applicable

Were you treated courteously by the City's Human Resources staff?

1 2 3 4 5 N/A

Did the person you talked to provide you with all the information you needed concerning City employment?

1 2 3 4 5 N/A

Were the application procedures and written instructions clear and understandable?

1 2 3 4 5 N/A

Additional Comments and/or Suggestions:

