

RIO LINDA ELVERTA RECREATION AND PARK DISTRICT
810 OAK LANE
RIO LINDA, CA 95673 (916) 991-5929

APPLICATION FOR EMPLOYMENT

Position(s): _____ Date: _____

Name: _____ Social Security _____
Mailing Address
(Street) _____ (City) _____
State: _____ Zip: _____ Phone: _____ Driver License: _____

GENERAL INFORMATION

1. Are you over 18? ___ Yes ___ No
2. Have you ever worked for RIO LINDA ELVERTA RECREATION AND PARK DISTRICT before? ___ Yes ___ No
3. If yes, list the position and supervise: _____
4. Are you a citizen or national of the United States? ___ Yes ___ No
5. If no, are you legally authorized to work in the U.S.? ___ Yes ___ No
6. Are you a military veteran? ___ Yes ___ No
7. Have you been convicted of a felony within the last 7 years? ___ Yes ___ No
8. If yes, please explain _____

(Conviction will not necessarily disqualify *an* applicant from employment)

EDUCATION

Name of School and Location	Date	Subjects	Degree/Diploma

REFERENCES:

Provide three work or personal references that may be contacted.

1. _____ Phone: _____

2. _____ Phone: _____
3. _____ Phone: _____

SPECIALIZED SKILLS AND TRAINING

List any achievements or activities that you consider relevant to your activity to perform the job for which you are applying such as certificates, awards, volunteer positions, etc.

EMPLOYMENT HISTORY

Provide the required information on the recent positions you have held. Start with your present or last job. If additional space is needed, continue on a separate piece of paper. Put a check mark next to any employer that you would **not** want us to contact.

EMPLOYER: _____ FROM: _____ TO: _____ SUPERVISOR NAME: _____
ADDRESS: _____ PHONE: _____
JOB TITLE: _____ DUTIES: _____

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ADDRESS: _____ PHONE: _____
JOB TITLE: _____ DUTIES _____

CERTIFICATION AND SIGNATURE

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.

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 employer.

SIGNATURE _____ **DATE** _____

