



County of Monterey

Employment Application

A Drug-Free Workplace
An Equal Opportunity Employer

Please return this application completed, signed, and dated to:

Monterey County Human Resources
168 West Alisal Street, 3rd Floor
Salinas, CA 93901

Or to the address specified on the job announcement.

1. County Assigned ID number:		2. Exam Number:		3. Position Applied For:	
4. Last Name:		First:		Middle Initial:	
5. Mailing Address:		City:		State: Zip:	
6. Home Telephone: () -		Work Telephone: () -		E-mail Address:	
7. Driver's License Number: (only for positions that require license)		Class:		Expiration: / / State:	
8. Are you able to produce documents that verify your right to work in the United States? Persons under age 18 must be able to produce a valid work permit upon employment.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
9. a. Are you currently a member or retiree of the Public Employees' Retirement System?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
b. Have you ever participated in the Public Employees' Retirement System?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
10. Are you currently or have you ever been employed by Monterey County? <i>If Yes, please indicate:</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates: _____		Position: _____			
Department: _____		Name(s) at time of employment: _____			
11. Do you have any relatives employed by Monterey County? (There may be limitations on the employment of Father, Mother, Brother, Sister, Wife, Husband, and Child. Each case is considered separately for potential conflict of interest) <i>If Yes, please indicate:</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Name: _____		Department: _____		Relationship: _____	
Name: _____		Department: _____		Relationship: _____	
12. What type of work will you accept? (Check all that apply.)				13. Would you accept shift work until days are available? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Type of Hire: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal					
Hours Worked: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> On-Call					
Shift: <input type="checkbox"/> Day <input type="checkbox"/> Swing <input type="checkbox"/> Night		14. How soon are you available for employment? _____			
15. Have you ever been convicted of a felony? Conviction of a felony does not necessarily disqualify a person from employment. This information will be reviewed for job relatedness. Please list all convictions except : those which have been sealed, expunged or statutorily eradicated, or pursuant to Labor Code 432.8, any convictions of marijuana-related offenses more than two years old. Use an additional sheet of paper if necessary. <i>If Yes, indicate:</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Date: _____		Charge: _____			
Location: _____		Action Taken: _____			
16. Locations where you are willing to work: (Check all that apply. Important: Employment with Monterey County may require transfer to different shifts or work locations. In accepting employment with the County, you are consenting to such transfers.)					
<input type="checkbox"/> Salinas <input type="checkbox"/> North County <input type="checkbox"/> Big Sur Coast <input type="checkbox"/> Monterey Peninsula <input type="checkbox"/> King City/South County					
17. Second Language Skills: If you have no second language, skip this question and go to question 18 on the next page. Please indicate your level of skill in the following languages (other than English) by selecting the appropriate letter code in front of the language. CHOOSE ONLY ONE NUMBER CODE PER LANGUAGE. Letter Codes: 1 = I can carry on a conversation freely but cannot read/write. 2 = I can carry on a conversation and can read/write. American Sign Language Basic <input type="checkbox"/> Advanced <input type="checkbox"/>					
Choose appropriate box below:					
<input type="checkbox"/> 1 <input type="checkbox"/> 2 Spanish <input type="checkbox"/> 1 <input type="checkbox"/> 2 Tagalog <input type="checkbox"/> 1 <input type="checkbox"/> 2 Vietnamese <input type="checkbox"/> 1 <input type="checkbox"/> 2 Japanese <input type="checkbox"/> 1 <input type="checkbox"/> 2 Mixteco <input type="checkbox"/> 1 <input type="checkbox"/> 2 Chinese-Mandarin					
<input type="checkbox"/> 1 <input type="checkbox"/> 2 Ilocano <input type="checkbox"/> 1 <input type="checkbox"/> 2 Korean <input type="checkbox"/> 1 <input type="checkbox"/> 2 Cambodian <input type="checkbox"/> 1 <input type="checkbox"/> 2 Triqui <input type="checkbox"/> 1 <input type="checkbox"/> 2 Oaxacan <input type="checkbox"/> 1 <input type="checkbox"/> 2 Other (Specify): _____					

Applicant Name: _____

Exam Number: _____

18. EDUCATION AND TRAINING SUMMARY

Provide information for education as it relates to the position for which you are applying.			
Colleges, Vocational or Technical Schools, Training Center	Major Subject	Units Completed	Type Degree/Certificate Awarded
Licenses and Certificates (State, Professional, Nursing, Trade, etc. which are required for this position.)			
Description	Issued by	Number	Expiration Date

19. EMPLOYMENT HISTORY

Begin with your present or most recent job. List all jobs separately including on-the-job training, volunteer work and military experience. Please be sure you describe completely in the section below the duties you performed which demonstrate that you have the knowledge and skills to perform the duties of the position for which you are applying. You may use additional sheets to complete your work history. A resume may be attached but is not a substitute for the application or for completing this section. **THIS SECTION MUST BE COMPLETED.** If a response to a supplemental questionnaire is required, it must accompany this application. (Incomplete applications may be returned.)

Date and Salary Information	Employer Information	Occupation and Description of Duties
From: / /	Employer:	Job Title:
To: / /	Address:	Your Duties:
(Mo/Day/Year)	Telephone:	
Monthly Salary: \$	Supervisor's Name:	
Hours Per Week:	Supervisor's Title:	
	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for Leaving:		
From: / /	Employer:	Job Title:
To: / /	Address:	Your Duties:
(Mo/Day/Year)	Telephone:	
Monthly Salary: \$	Supervisor's Name:	
Hours Per Week:	Supervisor's Title:	
	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for Leaving:		
From: / /	Employer:	Job Title:
To: / /	Address:	Your Duties:
(Mo/Day/Year)	Telephone:	
Monthly Salary: \$	Supervisor's Name:	
Hours Per Week:	Supervisor's Title:	
	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for Leaving:		

20. I understand and acknowledge that if I should be offered employment with Monterey County, I will be required to successfully pass a pre-employment drug test as a condition of employment with the County; and

I hereby certify that all information or omission of any material fact on this application is true to the best of my knowledge and understand that falsification of information on this application may lead to the removal of my name from the eligibility list or termination from employment.

Signature of Applicant: _____ Date: _____

EQUAL EMPLOYMENT OPPORTUNITY SELF-IDENTIFICATION FORM

This form will be detached from your employment application and will be treated as confidential. In order to achieve and maintain equal employment opportunity, the County of Monterey requires all persons to complete this portion of the application. The information in this portion will be used to enable the County of Monterey to achieve and maintain equality between its workforce and the county labor force.

If you require test accommodation due to a disability, please call (831) 755-5115 and ask to speak to the assigned Personnel Analyst. Please make the request at the time of application.

1. Ethnic Category: (Choose only one)

- WHITE (not of Hispanic origin)
All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.
- BLACK (not of Hispanic origin)
All persons having origins in any of the Black racial groups of Africa.
- HISPANIC
All persons of Cuban, Mexican, Puerto Rican, Central or South American or other Spanish culture or origin, regardless of race.
- ASIAN or PACIFIC ISLANDER
All persons having origins in any of the original peoples of the Far East, Southeast Asia, Indian Subcontinent, or Pacific Islands. (Does not include Filipinos)
- FILIPINO
All persons having origins in the peoples of the Philippine Islands.
- AMERICAN INDIAN or ALASKAN NATIVE
All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.

2. Gender:

- Male
- Female

3. Are you 40 years of age or older?

- Yes
- No

4. Do you require test accommodation?

- Yes
- No

5. Job Source Information:

I learned about this job opening through: (check the appropriate boxes)

- Friend/Relative
- County Employee
- County Employment Announcement
- County Personnel Office
- Interest Card
- Organization/Group (please specify) _____
- Advertisement (please specify which paper/magazine/radio) _____
- Website – Monterey County
- Website – Other (please specify) _____
- Other (please specify) _____