

CITY OF BIG BEAR LAKE



EMPLOYMENT APPLICATION

POST OFFICE BOX 10000, 39707 BIG BEAR BOULEVARD, BIG BEAR LAKE, CA 92315

PHONE 909-866-5831 E-MAIL bblhr@citybigbearlake.com

PLEASE VISIT OUR WEB SITE AT www.citybigbearlake.com

INSTRUCTIONS: PRIOR TO COMPLETING THIS APPLICATION, PLEASE CAREFULLY READ THE QUALIFICATIONS FOR EDUCATION AND EXPERIENCE ASSOCIATED WITH THE POSITION FOR WHICH YOU ARE APPLYING AS DESCRIBED IN THE JOB FLYER OR EMPLOYMENT ADVERTISEMENT. FAILURE TO COMPLETE THIS APPLICATION IN ITS ENTIRETY MAY EXCLUDE YOU FROM THE SELECTION PROCESS.

APPLICATIONS MUST BE COMPLETED IN FULL

RESUMES WILL NOT BE ACCEPTED IN LIEU OF COMPLETED APPLICATION

POSITION YOU ARE APPLYING FOR _____ DATE _____

LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

PREFERRED CONTACT TELEPHONE NUMBER _____

ALTERNATIVE CONTACT TELEPHONE NUMBER _____

E-MAIL _____

How did you learn about this job opening? _____

Have you ever applied for a position with the City of Big Bear Lake before? YES NO
If yes, please list positions applied for and dates: _____

Are there any days or shifts that you are unavailable to work? YES NO
If yes, list the days and/or shifts you are unavailable to work: _____

Are you 18 years of age or older? YES NO

If hired, can you provide proof of eligibility for employment in the U.S.A.? YES NO

Are you related to anyone currently working for the City of Big Bear Lake? YES NO
If yes, list the name and title of each relative: _____

NOTE: Relationships will be evaluated on a case-by-case basis and do not automatically disqualify you for employment.

As an adult, have you ever been convicted of a misdemeanor or felony? YES NO
If yes, please state all details on back of application under "Additional Information."

NOTE: Convictions will be evaluated on a case-by-case basis and do not automatically disqualify you for employment.

Have you ever been discharged or forced to resign due to misconduct or unsatisfactory service? YES NO
If yes, please state all details on back of application under "Additional Information."

THE CITY OF BIG BEAR LAKE IS AN EQUAL OPPORTUNITY EMPLOYER AND CONSIDERS ALL APPLICATIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, SEXUAL ORIENTATION, NATIONAL ORIGIN, AGE, MARITAL STATUS, OR DISABILITY OF ANY PERSON OR ANY OTHER LEGALLY PROTECTED STATUS PURSUANT TO CALIFORNIA'S FAIR EMPLOYMENT AND HOUSING ACT, CALIFORNIA LABOR CODE AND OTHER FEDERAL, STATE, AND LOCAL LAWS.

EDUCATION

Do you have a High School Diploma? YES NO GED Certificate? YES NO

	HIGH SCHOOL	COLLEGE/UNIVERSITY	OTHER
SCHOOL NAME			
CITY AND STATE			
YEARS COMPLETED (CIRCLE)	9 10 11 12	1 2 3 4	1 2 3 4
DIPLOMA/DEGREE OR COURSE OF STUDY (INCLUDE ANY HONORS)			

LIST SPECIALIZED SKILLS, EXPERIENCE, TRAINING AND QUALIFICATIONS THAT YOU FEEL MAKE YOU ESPECIALLY SUITED FOR THIS POSITION

LICENSES AND PROFESSIONAL REGISTRATION

PLEASE ATTACH A COPY TO THE APPLICATION IF REQUIRED FOR THE POSITION YOU ARE APPLYING FOR.

TYPE OF LICENSE	STATE	NUMBER	EXPIRATION

OTHER SPECIALIZED TRAINING OR SKILLS

LANGUAGE, OFFICE EQUIPMENT, COMPUTER SOFTWARE, MACHINE OPERATIONS, ETC.

PROFESSIONAL MEMBERSHIPS

MEMBERSHIP IN PROFESSIONAL OR TECHNICAL ASSOCIATIONS RELATED TO THE POSITION FOR WHICH YOU ARE APPLYING

EXPERIENCE

List your present or most recent job first; list each promotion separately; include self-employment and US military service. List **all** positions you have held within the last **ten years**. Identify and explain any lapses between positions. If you need more space you may attach additional sheets. **NOTE: A resume may be attached, but will not substitute for completion of this section.** The information provided in this application and any supplemental questionnaires required will form the sole basis for any decision to advance in the selection process.

**FAXED APPLICATIONS WILL NOT BE ACCEPTED
APPLICATIONS MUST BE COMPLETED IN FULL
RESUMES WILL NOT BE ACCEPTED IN LIEU OF COMPLETED APPLICATION**

ORGANIZATION		TITLE		
ADDRESS				
DATES OF EMPLOYMENT	FROM	TO	STARTING SALARY	ENDING SALARY
NAME/TITLE OF SUPERVISOR				PHONE
DUTIES				
REASON FOR LEAVING				
MAY WE CONTACT THIS EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/> INITIAL _____ IF NO, WHY NOT?				
ORGANIZATION		TITLE		
ADDRESS				
DATES OF EMPLOYMENT	FROM	TO	STARTING SALARY	ENDING SALARY
NAME/TITLE OF SUPERVISOR				PHONE
DUTIES				
REASON FOR LEAVING				
MAY WE CONTACT THIS EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/> INITIAL _____ IF NO, WHY NOT?				
ORGANIZATION		TITLE		
ADDRESS				
DATES OF EMPLOYMENT	FROM	TO	STARTING SALARY	ENDING SALARY
NAME/TITLE OF SUPERVISOR				PHONE
DUTIES				
REASON FOR LEAVING				
MAY WE CONTACT THIS EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/> INITIAL _____ IF NO, WHY NOT?				

POSITION APPLIED FOR

ORGANIZATION			TITLE		
ADDRESS					
DATES OF EMPLOYMENT	FROM	TO	STARTING SALARY	ENDING SALARY	
NAME/TITLE OF SUPERVISOR				PHONE	
DUTIES					

REASON FOR LEAVING

MAY WE CONTACT THIS EMPLOYER? YES NO INITIAL _____ IF NO, WHY NOT?

ORGANIZATION			TITLE		
ADDRESS					
DATES OF EMPLOYMENT	FROM	TO	STARTING SALARY	ENDING SALARY	
NAME/TITLE OF SUPERVISOR				PHONE	
DUTIES					

REASON FOR LEAVING

MAY WE CONTACT THIS EMPLOYER? YES NO INITIAL _____ IF NO, WHY NOT?

ADDITIONAL INFORMATION

CERTIFICATE OF APPLICATION
 I CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY OMISSION OR FALSIFICATION CONSTITUTES GROUNDS FOR REJECTION OF THIS APPLICATION OR TERMINATION OF EMPLOYMENT. I UNDERSTAND THAT THE CITY OF BIG BEAR LAKE WILL THOROUGHLY INVESTIGATE MY WORK AND PERSONAL HISTORY AND WILL VERIFY ALL DATA GIVEN ON THIS APPLICATION, ON RELATED DOCUMENTS, AND IN INTERVIEWS. I AUTHORIZE ALL INDIVIDUALS, SCHOOLS, AND FIRMS NAMED HEREIN, EXCEPT MY CURRENT EMPLOYER IF SO NOTED, TO PROVIDE ANY INFORMATION REQUESTED ABOUT ME, AND I RELEASE THEM AND THE CITY OF BIG BEAR LAKE FROM ALL LIABILITY FOR DAMAGE IN PROVIDING THIS INFORMATION.

SIGNATURE _____ DATE _____

ALL JOB OFFERS ARE CONTINGENT UPON APPLICANT PASSING A BACKGROUND INVESTIGATION AND JOB-RELATED PRE-EMPLOYMENT PHYSICAL EXAMINATION, INCLUDING A DRUG TEST.

COMPLETION OF THIS SECTION IS OPTIONAL. PLEASE COMPLETE THIS SECTION FOR STATISTICAL PURPOSES. THIS SECTION WILL BE DETACHED PRIOR TO THE REVIEW OF YOUR APPLICATION.

MALE FEMALE AGE: UNDER 40 40 OR OLDER

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 Mexican, Puerto Rican, Cuban, 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, the Indian Subcontinent, or the Pacific Islands, Korea, the Philippine Islands, or Samoa.

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.