

**North Coast Unified Air Quality
Management District**
2300 Myrtle Avenue, Eureka, CA 95501
Telephone (707) 443-3093 FAX (707) 443-3099
http://www.ncuaqmd.org



Application for Employment

Please type or print in dark ink. Use additional pages if necessary.

1. Title of position: _____

2. Last Name: _____ First: _____ Middle: _____

3. Address: _____ City: _____ State: _____ Zip: _____

4. Home Phone: _____ Work Phone: _____ SS# _____

5. Have you graduated from high school? Yes _____ No _____ GED: _____

If no, circle the highest grade you completed: 6 7 8 9 10 11

6. List any relatives employed by NCUAQMD or on the Board of Directors: _____

7. Have you worked for NCUAQMD previously? _____ If so, when? _____

8. List any special training you have had which may help qualify you for the position. Include trade, vocational, business schools, etc. Indicate type of training, where acquired, dates, and whether you completed it successfully. _____

9. List any licenses or certificates you have which may help qualify you for the position for which you are applying. Include driver's license, typing or steno certificates, professional registration, etc.

State	Number	Date issued	Date expires
-------	--------	-------------	--------------

Driver's license: _____

10. List colleges attended:

Name	Location	Dates (From/To)	Major	Units	Degree	Date Earned
------	----------	-----------------	-------	-------	--------	-------------

11. If the position for which you are applying requires specific work experience, indicate the amount of qualifying work experience you have. Years: _____ Months: _____

12. Have you ever: (If yes, give details on a separate piece of paper and attach to application)

a. Been dismissed or fired from a position for any reason? Yes _____ No _____

b. Resigned from or quit a position while under investigation or after being informed discipline would be taken against you, or during an appeal of a disciplinary action? Yes _____ No _____

c. Been rejected or told you would not receive permanent or continued employment during any type of probationary or trial period on the job? Yes _____ No _____

13. If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in the U.S.? Yes _____ No _____

14. Have you ever been convicted of any court offense? (Omit minor traffic violations, any offense committed prior to your 18th birthday that was finally adjudicated in a juvenile court under a youth offender law, or any incident under Welfare and Institutions Code Section 781 or Penal Code Section 1203.45.) Yes _____ No _____

If yes to item 14, state what offense, when, where, and disposition of case on a separate piece of paper. Conviction of a crime is not necessarily a bar to employment. Each case is considered separately based on job requirements.

15. References – List the names and addresses of at least three persons living in the U.S. who are not related to you and who have definite knowledge of your qualifications for the position for which you are applying.

Name	Address	City	State	Zip Code	Phone
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

16. Work History – Please list your work experience, beginning with your present or most recent job. Show promotions as separate jobs. Be sure to include appropriate military experience. A resume may not be substituted for this section, although it may be attached to provide more information.

1. Dates of Work: From (Month/Year) _____ To (Month/Year) _____ Full-time _____ Part-time _____ Hrs. per Week _____
Employer's Name _____ Address _____
Supervisor's Name _____ Title _____
Your Title _____ Salary _____ per _____
Describe your duties: _____

Reason for Leaving: _____

2. Dates of Work: From (Month/Year) _____ To (Month/Year) _____ Full-time _____ Part-time _____ Hrs. per Week _____
Employer's Name _____ Address _____
Supervisor's Name _____ Title _____
Your Title _____ Salary _____ per _____
Describe your duties: _____

Reason for Leaving: _____

3. Dates of Work: From (Month/Year) _____ To (Month/Year) _____ Full-time _____ Part-time _____ Hrs. per Week _____
Employer's Name _____ Address _____
Supervisor's Name _____ Title _____
Your Title _____ Salary _____ per _____
Describe your duties: _____

Reason for Leaving: _____

4. Dates of Work: From (Month/Year) _____ To (Month/Year) _____ Full-time _____ Part-time _____ Hrs. per Week _____
Employer's Name _____ Address _____
Supervisor's Name _____ Title _____
Your Title _____ Salary _____ per _____
Describe your duties: _____

Reason for Leaving: _____

Read carefully before signing. I certify that all statements made in this application are true to the best of my knowledge. I understand that false statements or omissions of material facts shall be sufficient cause for dismissal. I hereby give permission to the employers listed to release information concerning my work history.

Yes _____ No _____ If no, please explain: _____

Signature _____ Date _____