

**CITY OF RIVERSIDE
EMPLOYMENT APPLICATION**

NAME (PLEASE PRINT) LAST	FIRST MIDDLE	SOCIAL SECURITY NUMBER
ADDRESS	CITY STATE ZIP	If you are under 18, what is your date of birth?
TELEPHONE NUMBER ()	ALTERNATE CONTACT NUMBER ()	POSITION YOU ARE SEEKING?

I AM APPLYING FOR FULL TIME PART TIME TEMP/SEASONAL ON CALL ARE YOU LEGALLY ELIGIBLE TO WORK IN THE UNITED STATES YES NO
 HAVE YOU BEEN CONVICTED OF A FELONY? (A FELONY CONVICTION IS NOT NECESSARILY A BAN TO EMPLOYMENT. ALL CIRCUMSTANCES WILL BE CONSIDERED)
 YES NO IF YOU ANSWERED "YES" PLEASE EXPLAIN _____

EMPLOYMENT RECORD Please state your previous work history, beginning with your most recent experience. May we contact these employers? Yes No

COMPANY NAME – CURRENT/MOST RECENT	ADDRESS	PHONE	SUPERVISOR
FROM: TO:	LAST POSITION HELD:	PAY RATE	REASON FOR LEAVING
COMPANY NAME	ADDRESS	PHONE	SUPERVISOR
FROM: TO:	LAST POSITION HELD:	PAY RATE	REASON FOR LEAVING
COMPANY NAME	ADDRESS	PHONE	SUPERVISOR
FROM: TO:	LAST POSITION HELD:	PAY RATE	REASON FOR LEAVING

EDUCATIONAL BACKGROUND

HIGH SCHOOL	ADDRESS	DID YOU GRADUATE? YES _____ NO _____	STILL ATTENDING? YES _____ NO _____
COLLEGE/TRADE SCHOOL MAJOR/DEGREE	CITY	DID YOU GRADUATE?	STILL ATTENDING?
1.	1.	1. YES _____ NO _____	1. YES _____ NO _____
2.	2.	2. YES _____ NO _____	2. YES _____ NO _____

PLEASE LIST NAMES OF ALL RELATIVES THAT CURRENTLY WORK FOR THE CITY OF RIVERSIDE:

MILITARY SERVICE BRANCH:	DATES OF ACTIVE DUTY:	TRAINING RECEIVED:
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HAVE YOU EVER BEEN PREVIOUSLY EMPLOYED BY THE CITY OF RIVERSIDE? YES NO IF SO, UNDER WHAT NAME: _____

REFERENCES

NAME	ADDRESS/PHONE NUMBER	KNOWN HOW LONG?	RELATIONSHIP

City of Riverside is committed to a drug free work environment

I hereby apply for employment with City of Riverside. I agree to conform to the rules, expectations, and regulations of City of Riverside. I understand that City of Riverside or I may terminate my employment at any time, with or without notice, for any reason.

I hereby authorize City of Riverside to make inquiry of all persons, schools, companies, credit bureaus, consumer reporting agencies, and law enforcement agencies to supply all information concerning me and to furnish reports and documents to City of Riverside about me. I hereby release them and City of Riverside from any and all liability and responsibility by reason of their doing so.

City of Riverside is an Equal Opportunity Employer. Federal, state, and/or local law prohibits unlawful discrimination in employment practices because of race, color, religion, age, national origin, sexual orientation, veteran status, or disability. No question on the application is asked for the purpose of limiting or excluding any applicant's consideration for employment because of his or her race, color, religion, sex, sexual orientation, age, national origin, veteran status, or disability. Note: Any false statements made in this application will be considered sufficient cause for dismissal upon discovery thereof.

In compliance with the Immigration Reform and Control Act of 1986, City of Riverside will hire only U. S. Citizens and aliens lawfully authorized to work in the U. S. Prior to beginning employment, all new employees will be required to complete Form I-9 Employment Eligibility Verification.

I hereby acknowledge that the information provided on this Employment Application is true and correct.

Applicants' Signature _____ Date _____



Voluntary Self-Identification Form

City of Riverside is required by certain contracts to maintain the following information for equal employment opportunity purposes. The requested information is voluntary. All information received on this form will be kept confidential and separate from your application and personnel files. Refusing to complete this form will in no way result in an adverse employment action.

Name: _____ Date: _____

Applied for or Current Position: _____

Elect not to self-identify

1a. Please check one:

Hispanic or Latino, defined as a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin regardless of race. (Please skip to question 2 and 3)

Not Hispanic or Latino. (Please answer questions 1b and 2)

1b. Select from the following:

White, defined as a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American, defined as a person having origins in any of the black racial groups of Africa.

Asian, defined as a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native, defined as a person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Native Hawaiian or Other Pacific Islander, defined as a person having origins in any of the original peoples of Hawaii, Guam, Tonga, Samoa or other Pacific Islands.

Two or More Races, defined as all persons who identify with more than one of the above five races.

2. Please check one:

Male

Female

3. Please check all that apply:

- Vietnam Era Veteran, defined as a person who: (i) served on active duty in the U.S. military, ground, naval or air service for a period of more than 180 days, and who was discharged or released there from with other than a dishonorable discharge, if any part of such active duty was performed: (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in all other cases; or (ii) was discharged or released from active duty in the U.S. military, ground, naval or air service for a service connected disability if any duty was performed (A) in the Republic of Vietnam between February 28, 1961 and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in any other location.

- Other Protected Veteran, defined as any veteran who served on active duty in the U.S. military, ground, naval or air service in a war, campaign or expedition in which a campaign badge have been authorized under laws administered by the Department of Defense.

- Recently Separated Veteran, defined as any veteran who served on active duty in the U.S. military, ground, naval or air service during the one-year period beginning on the date of such veteran's discharge or release from active duty.

- Armed Forces Service Medal Veteran, defined as any veteran who, while serving on active duty in the Armed Forces, participated in the United States military operation for which a service medal was awarded pursuant to Executive Order 12985.



**AUTHORIZATION FOR RELEASE
OF CONSUMER REPORT
INFORMATION**

Applicant Complete the Following:

- 1. In connection with my application for employment, I understand and agree that prior to or during my employment with the City of Riverside a consumer report or an investigative consumer report may be requested by the City of Riverside or on its behalf that will include information as to my character, work habits, performance and experience, along with reasons for termination of past employment. I understand that as directed by company policy and consistent with the job described, the City of Riverside or its agent may be requesting information from public and private sources about my driving record, court record, education, credentials, credit and references.
- 2. I acknowledge that a telephonic facsimile (FAX) or photographic copy shall be as valid as the original.
- 3. I understand and agree that the City of Riverside or its agent may request information from various federal, state and other agencies, including public and private sources which maintain records concerning my past activities relating to my driving record, credit history, criminal record, civil matters, previous employment and educational background. I acknowledge that I have been provided a copy of the Disclosure of Intent to Procure a Consumer Report. PRE-EMPLOYMENT INFORMED CONSENT AND RELEASE OF LIABILITY AND TEST RESULTS.
- 4. I hereby authorize, without reservation, any person associated with any law enforcement agency, institution, information service bureau, school, past or present employer, and reference contacted by the City of Riverside or its agent, to release this information described in Section 1 to the investigating company or agency which will furnish the information to the City of Riverside for employment purposes. The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes. I hereby release the City of Riverside and its agents and all persons, agencies, and entities providing information or reports about me from any and all liability, claims and damages arising out of the requests for or release, furnishing or reviewing any of the above mentioned information or reports, to the extent I may legally do so.

Please Print Your Full Birth Name Date of Birth

Please print other last names you have used in previous 7 years Social Security Number

Address City State Zip

Drivers License Number State Issuing License

Signature Date Signed