CITY OF WESTLAKE VILLAGE

31200 Oak Crest Drive • Westlake Village, CA 91361 • (818) 706-1613 • FAX (818) 706-1391

EMPLOYMENT APPLICATION

An Equal Opportunity Employer

Please Print

Date _____

Name _____

Last First Middle

Present Address _____

Street City State Zip

Cell Phone _____ Home Telephone _____ Business Phone _____

Employment Desired

Position applying for: _____

Are you applying for: Regular full-time work? Yes ___ No ___ Regular part-time work? Yes ___No ___

Temporary work, e.g. summer or holiday work? Yes___ No ___

What days and hours are you available for work? _____

If applying for temporary work, during what period of time will you be available? _____

Are you available for work on weekends? Yes ___ No ___ Would you be available to work overtime, if necessary? Yes ___ No ___

If hired, on what date can you start work? _____

Personal Information

Have you ever applied to or worked for the City of Westlake Village before? Yes ___ No ___ If yes, when? _____

The City does not unlawfully discriminate on the basis of marital status or family relationships. However, the City may refuse to hire relatives of present employees if doing so would result in actual or potential problems in supervision, security, safety or morale or if doing so could create conflicts of interest. Do you have any friends or relatives working for the City of Westlake Village? Yes ___ No ___

If yes, state name(s) and relationship _____

If hired, would you have a reliable means of transportation to and from work? Yes ___ No ___

Are you at least 18 years old? Yes ___ No ___ (If under 18, hire is subject to verification that you are of minimum legal age.)
In compliance with federal law, all persons hired are required to verify identity and eligibility to work in the United States. If hired, can you provide proof of identity and eligibility to work in the United States, as required by law? Yes ___ No ___

Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodation? (A position description will be provided) Yes ___ No ___

If no, describe the functions that you cannot perform _____

_____

(Note: The City of Westlake Village complies with the ADA and California law and provides reasonable accommodation measures to enable eligible applicants/employees to perform the essential functions of the position.)

Are you currently employed? Yes ____ No ____ If so, may we contact your current employer? Yes ____ No ____

Education, Training and Experience

School	Name and Location	No. of years Completed	Did you Graduate?	Degree or Diploma
High School			**Yes ____** **No ____**	
College/University			**Yes ____** **No ____**	
Vocational/Business/ Graduate/Other			**Yes ____** **No ____**	

Employment History

List below all present and past employment starting with your most recent employer (last 7 years is sufficient.) Account for all periods of unemployment. You must complete this section even if attaching a resume. Attach additional page(s) if necessary.

Name of Employer _____ Position _____

Address _____
Street City State Zip

Telephone Number _____ Supervisor's Name _____ Type of Business _____

Date of Employment: From _____ To_____ Monthly Pay: Starting _____ Ending _____

Duties_____

_____

_____

Reason for Leaving: _____ Upon leaving, were you eligible for rehire? Yes ____ No ____

Name of Employer _____ Position _____

Address _____
Street City State Zip

Telephone Number _____ Supervisor's Name _____ Type of Business _____

Date of Employment: From _____ To_____ Monthly Pay: Starting _____ Ending _____

Duties_____

_____

_____

Reason for Leaving: _____ Upon leaving, were you eligible for rehire? Yes ____ No ____

Name of Employer _____ Position _____

Address _____
Street City State Zip

Telephone Number _____ Supervisor's Name _____ Type of Business _____

Date of Employment: From _____ To_____ Monthly Pay: Starting _____ Ending _____

Duties_____

_____

_____

Reason for Leaving: _____ Upon leaving, were you eligible for rehire? Yes ____ No ____

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that the answers given by me are true and correct to the best of my knowledge. I understand that any misstatement or omission of fact on this application may result in rejection of this application or immediate discharge if I am employed, regardless of the time elapsed before discovery.

____ I hereby authorize the City of Westlake Village to investigate my references, prior employers, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed, all prior employers, and all educational institutions attended, to disclose to the City any and all letters, reports and other information related to my records, without giving me prior notice of such disclosure. By providing this page of the application to the references, prior employers and educational institutions attended, to the broadest extent permitted by law, I release them from any liability for providing the City with all information.

_____ I understand that if I am employed by the City of Westlake Village, the terms of my employment will be governed solely by the City's personnel rules, as adopted and as may be amended without notice in the future, by the Westlake Village City Council. I understand that no employee or representative or agent of the City has authority to modify those rules and therefore nothing contained in this application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the City or alter the City's duly adopted personnel rules.

Date _____ Applicant's Signature _____

Note: Attach additional page(s) if necessary.

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

Name _____

Address _____
No. Street City State Zip

Occupation _____

Telephone Number _____ Number of Years Acquainted _____

Name _____

Address _____
No. Street City State Zip

Occupation _____

Telephone Number _____ Number of Years Acquainted _____

Name _____

Address _____
No. Street City State Zip

Occupation _____

Telephone Number _____ Number of Years Acquainted _____